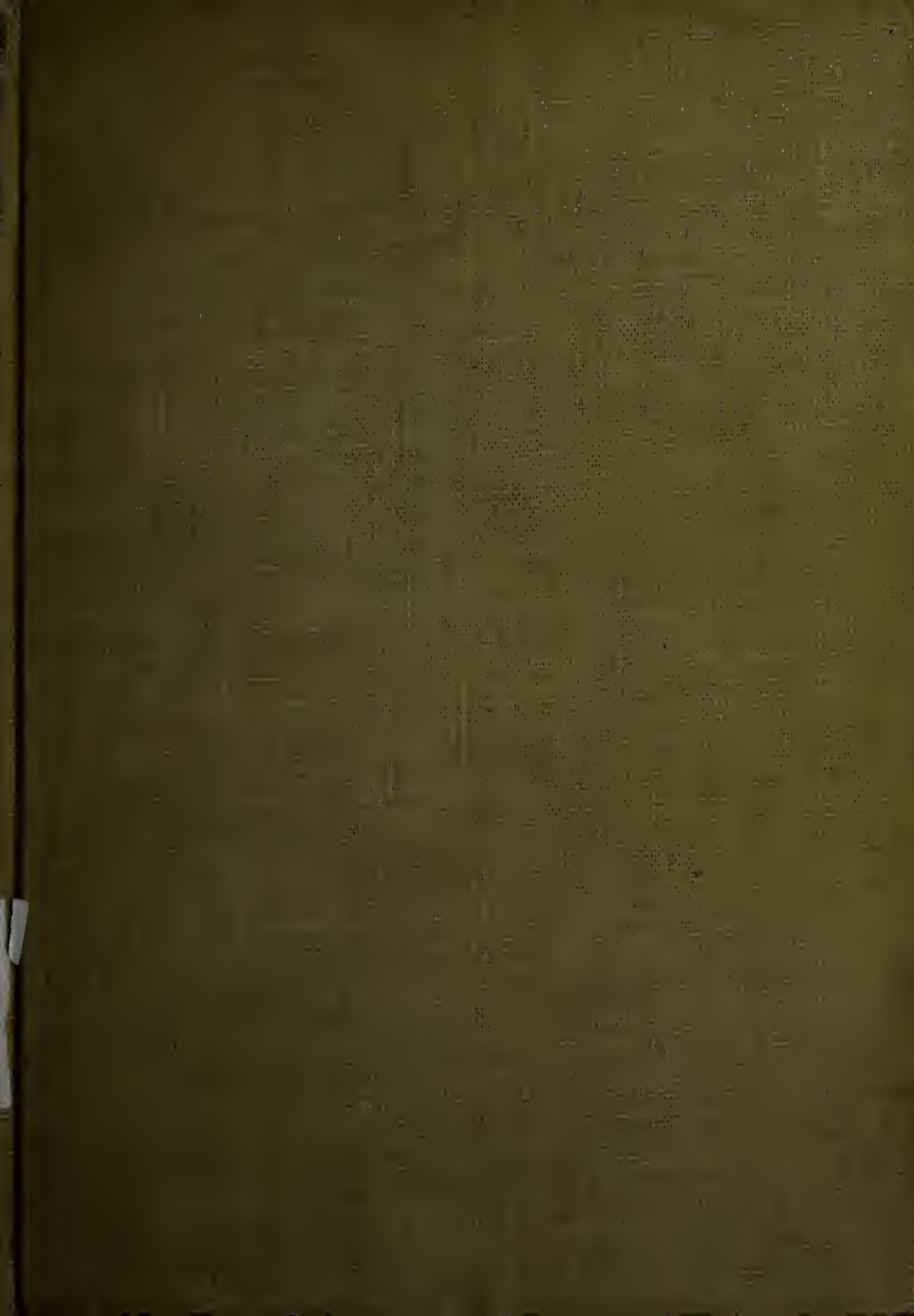






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Vol. I. No. 1

July, 1908

The Bulletin

OF THE

California Association for the Study and Prevention of Tuberculosis.

A BI-MONTHLY PUBLICATION

(Application for entry as second-class matter made at the Alhambra Postoffice, Alhambra, Cal.)

The aim of this publication is to promote the study and dissemination of knowledge concerning the prevention and cure of tuberculosis, to aid in the establishment of institutions intended for those purposes, and to co-operate with such other organizations as can render aid in the solution of the tuberculosis problem.

Subscription price, \$1.00 a year, which includes membership in the California Association for the Study and Prevention of Tuberculosis.

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Office of Publication, 206 East Main street, Alhambra, California.

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AMERICAN
TUBERCULOSIS
SOCIETY

HISTORICAL NOTES

WITH AN APPEAL FOR CONCERTED, UNITED WORK.

The California Association for the Study and Prevention of Tuberculosis came into existence on December 3rd, 1907, at Riverside, California, at which time the Southern California Anti-Tuberculosis League was merged into the state association.

The Southern California Anti-Tuberculosis League in turn was organized at Pasadena, Cal., on December 3rd, 1902, and held its meetings at the same times and places decided upon by the Southern California Medical Society. Through the influence of the League, the Los Angeles Helping Station for Indigent Consumptives was opened on August 6th, 1906, since which time three weekly clinics have been open to the tuberculosis poor, at which free medical advice and aid are given. Several hundred patients have been examined and much good undoubtedly done by the Helping Station. Lack of funds have thus far prevented the extension of the work to the extent of giving milk, eggs and so on. For only part of this time, was it possible to maintain a visiting nurse.

Through the League, several score of lectures were given before different organizations and thousands of circulars on the prevention of tuberculosis were sent through the schools of Southern California.

To extend the work of the League, it was decided to merge it into a state society along the lines advocated by the National Association and this was done as stated, on December 3rd, 1907.

Four years ago, the Southern California Anti-Tuberculosis League distributed about 200,000 circulars through co-operation with the Boards of Supervisors of the Southern counties. During the last several months, 300,000 circulars were distributed to the school children of California, through co-operation with the California State Board of Health and the State Superintendent of Education. Some fifteen thousand booklets were distributed to teachers through the same agencies. In this way, prevention literature will reach the eye of every teacher and almost every family in the state.

So that at this writing, the present status of anti-tuberculosis work in California is organized somewhat as follows:

1. A State Association, to which the City societies are maintaining a more or less intimate association.
2. City societies in Los Angeles, San Francisco, Redlands and San Diego, with several others in process of organization.

The Los Angeles Society for the Study and Prevention of Tuberculosis maintains at 737 Buena Vista street, a Helping Station for the treatment of consumptives and its field of influence is constantly growing. Through timely and illustrated articles in the lay press, physicians, charitable associations and the laity have alike learned of this institution and are constantly referring cases to it.

Thus the Los Angeles Evening Express on a front page gave some large views in a cut 9 by 9 and the following account of the work of the Station, which may be of sufficient interest to merit publication in this bulletin:

Recommendations of the recent Anti-Tuberculosis league in St. Louis relative to the prevention of the spread of the white plague, have aroused considerable interest in Southern California, where the influx of eastern consumptives has become a problem.

Inquiry among organizations which come into contact with the unfortunates who are attacked by this trouble show that Los Angeles investigators are fully alive to the problem which faces the communities of California, to which many easterners gravitate because of the climate.

Los Angeles is fortunate in being the headquarters of the California Association for the Study and Prevention of Tuberculosis. The officers of this organization are: President, C. B. Boothe, Los Angeles; vice-presidents, Drs. George H. Evans, San Francisco, C. C. Browning, Monrovia; secretary, Dr. George H. Kress, Los Angeles; treasurer, Gen. Adna R. Chaffee, Los Angeles. The California association is a branch of the national organization of the same name. City organizations have been formed in Los Angeles, San Francisco, San Diego and Redlands.

About 300,000 leaflets on the prevention of tuberculosis recently have been sent out by the state association for distribution through the schools of California.

Further than that, the association supplies lecturers to clubs whose members may be interested in this problem, which is of great magnitude both from vital and economic standpoints. The secretary supplies literature and other information upon request.

For more than a year the Los Angeles society has maintained a helping station for consumptives, and almost 300 patients have been under its charge. Its headquarters are at 737 Buena Vista street, and clinics are held there from 4 to 5 o'clock on Monday, Wednesday and Friday afternoons. A graduate nurse is in attendance and follows up the work of the doctors by visitation to the homes of the unfortunates.

Much aid is also rendered by the Barlow sanatorium, by the visiting nurses of the college settlement, by the Los Angeles county hospital, by the Assistance league and by the Associated Charities.

Thus far the helping station has had to content itself by giving medicinal advice and visitation by the nurse, but it hopes soon to inaugurate further aid by giving to those in great need milk, eggs and other foodstuffs necessary in the cure of tuberculosis.

"The association," said its secretary, "hopes that the people of California soon will be aroused to the full significance of what the tubercular mortality means to the Golden state. In July will appear the first number of a bi-monthly bulletin which will be for educational purposes along these lines.

"The present plans contemplate the formation of local clubs for the prevention of tuberculosis in every city of the state.

"The causes of tuberculosis being known, it is a comparatively easy matter to do away with their action, once the proper steps are taken. For there can be no tuberculosis or consumption unless the germs of tuberculosis are present in the tissues of the infected person. Consequently, if germs can be prevented from entering the body, there can be no tuberculosis. Herein lies the value of compulsory registration of all persons having consumption, and of compulsory fumigation of their rooms. There is now a state law requiring compulsory registration and the Los Angeles board of health has been urged to enforce it.

"The tuberculosis germs nearly all come from the sputum of persons having tuberculosis. If this sputum could be destroyed there would be little or no tuberculosis. In addition, all efforts to build up the resistance of the race should be encouraged, and to this end the prevention of overwork, overcrowding, under-feeding and vicious habits are all efforts in the right direction."

Los Angeles is fortunate also in being the home of the Barlow Sanatorium, an endowed institution with a capacity of thirty-two beds, which has done much good work and of which we hope to speak at more length in a subsequent issue.

At Redlands, the Society has also maintained a Sanatorium and has done efficient service.

San Francisco's activity received a great set back when the great disaster overtook that city, two years ago, for on that very day, arrangements had been made for the organization of an association. During the last two months, however, the Society effected a permanent organization and will no doubt give an excellent account of itself.

At San Diego, the work has not yet taken a tangible expression in Sanatorium work, but plans for more active service are being made.

At Pasadena, a Health Association, owning considerable property, exists and there is a corps of enthusiastic workers who will organize in the near future.

These are some of the activities that have thus far come into existence. Through the Bulletin and the work of the State Society it is hoped to co-ordinate efforts in centers already organized and to reach out and develop interest and organization in many other places throughout the State.

For this tuberculosis is not a local problem or a trifling, evanescent issue. It is a question intimately associated with the public health of California and its happy solution will depend on loyal, concerted and united effort on the part of the organizations now existing and yet to be formed. These organizations must be the leaders in their respective communities not only in taking charge of practical work to help the poor consumptives, but in acting as educators for the press and lay people generally. All that is needed is tact and diligence to bring the people at large in line as loyal promoters of our efforts and then it will be a simple matter to go before the legislature and secure the measures so greatly needed.

The legislature meets this fall. If we work unitedly and diligently, we will be strong enough by then to obtain much needed legislation. But union is essential if our influence is to be of any avail. To that and all our other aims, we ask the support of all who are interested in the extermination of the great white plague, this plague that at some time or other fastens its clutches on the great majority, and which unnecessarily carries to untimely graves, one out of every ten persons, most of them in the viable age period.

TYPE OF CONSTITUTION AND BY-LAWS RECOMMENDED FOR CITY SOCIETIES

Below is printed a copy of the Constitution and By-Laws of the Los Angeles Society for the Study and Prevention of Tuberculosis, which is suggested as a type for other similar societies. Modifications desirable for local reasons should of course be made. It will help the work in California, however, if all the component societies can work under the same general rules. Experience has shown that the By-Laws presented are fairly well adapted to the aims of an anti-tuberculosis society. The Constitution and By-Laws of the Los Angeles Society read thus:

CONSTITUTION

ARTICLE I — NAME

The name of this organization shall be the Los Angeles Society for the Study and Prevention of Tuberculosis, and it shall identify itself as fully as possible with the California and National Associations for the Study and Prevention of Tuberculosis.

ARTICLE II — PURPOSES

The purposes of this society shall be the study and dissemination of knowledge concerning the prevention and cure of tuberculosis, in all its various aspects, and the establishment of such institutions and the co-operation of efforts with other organizations as can render aid in the attainment of the above named objects.

BY-LAWS

ARTICLE I — MEMBERSHIP

Section 1. The Society shall consist of active, patron, subscribing and honorary members.

Section 2. Payment of dues in accordance with the By-Laws shall constitute membership without additional qualification.

Section 3. Active members are such persons who pay the sum of two dollars annually, provided that one dollar of such dues be annually sent to the California Association for the Study and Prevention of Tuberculosis, in return for which sum, all such members shall be entitled to the privileges of publications, printed matter and other privileges conferred by membership in the State Association.

Section 4. Patron members shall be those who annually pay the sum of ten dollars or more to the Society, provided that two dollars of the dues of all such patron members shall be set aside to entitle such patron members to the privileges of active membership as set forth in Section 3.

Section 5. Subscribing members are all persons who, annually or otherwise, pay to this Society any sum less than two dollars.

Section 6. Honorary members are such persons as may be elected by the Board of Directors as being eligible to such honor.

ARTICLE II — OFFICERS

Section 1. The officers of this Society shall be a President, a First Vice President, a Second Vice President, a Secretary, a Treasurer and a Board of Directors, who shall perform the duties customary to their offices and such other duties as may be laid down in these By-Laws. They shall hold office for one year or until their successors are elected.

Section 2. The Board of Directors shall consist of the five officers named in Section 1, and ten other members of the Society. Seven members of the Board shall constitute a quorum. The President of the Society shall be Chairman of the Board of Directors. The Board of Directors shall have control of the business of the Society, but the Board of Directors shall not incur any indebtedness or liability for the Association, in excess of the amount of its funds in the hands

of the Treasurer. All vacancies arising shall be filled by the Board of Directors.

Section 3. The Executive Committee shall consist of the President, Secretary, Treasurer, and four other members of the Society, and may transact such business as may be delegated to it by the Board of Directors. Four members thereof shall constitute a quorum. Its four elected members shall be elected by the Board of Directors.

Section 4. The Board of Directors shall annually elect an Advisory Board of men and women interested in the work of the Society, of such number as in its judgment seems best, and when deemed desirable the Board of Directors shall hold conjoint meetings with the Advisory Board.

Section 5. The annual election of officers shall be held at a regularly called meeting in December, date to be set by the President or Board of Directors, and the newly elected officers shall assume the duties of their respective offices at the time of their election unless otherwise agreed upon.

The Board of Directors shall meet on the call of the President; or at the written request of any three members of the Board.

Section 6. All local literature and lectures delivered under the name of the Society shall be issued or delivered only with the consent of the Board of Directors.

Section 7. Amendments to these By-Laws may be made by the Board of Directors at any regularly called meeting, upon a majority of those present agreeing thereto.

Have you paid your

Membership Dues for 1908 ?

If not, kindly send check for \$1.00

to the secretary,

Dr. George H. Kress,
Johnson Building,
Los Angeles, California.

Until our State is educated concerning the tuberculosis problem, the work must be carried on through private subscriptions. Your membership fee will help distribute many pieces of literature to those who sadly need it.

CIRCULAR OF INFORMATION ON PREVENTION OF TUBERCULOSIS.

Three hundred thousand of the following circulars have been distributed throughout the State of California. The Association can supply orders at virtually the cost of printing:

CIRCULAR NO. II

OF THE

California Association for the Study and Prevention of Tuberculosis

Tuberculosis is a communicable disease.

Tuberculosis is a preventable disease.

Tuberculosis is a curable disease.

Tuberculosis is communicated by means of the tubercle bacilli, tiny vegetable micro-organisms which are thrown off from tubercular ulcerating surfaces, most frequently from the lungs in the expectoration.

The tubercular patient is not dangerous to others if this expectorated matter is properly destroyed.

Tuberculous discharges should be received in a receptacle such that the matter can be burned, or otherwise destroyed, and the receptacle boiled.

Expectoration should **never** be swallowed.

When coughing or sneezing, patients should cover their mouths with their hand or handkerchief.

Several forms of spit cups are on the market, some of pasteboard which can be burned, others of metal which can be boiled, others of metal form holding a papier maché cup which can be replaced at a nominal expense. Whatever form used should be covered to prevent flies from coming in contact with the sputum.

Disinfectant solutions may be used; carbolic acid solution 5-100; concentrated lye one tablespoonful to a glass of water; formalin 5-100.

Expectoration into cloths which are carried in the pocket or placed about the bedding is a dangerous practice. The danger is of further infection of the patient and the infection of others.

If circumstances are such that cloths must be used temporarily, they should be burned, never washed. After the sputum has become dry they are dangerous to persons who handle them.

Expectoration should be destroyed before it dries.

Expectoration should be kept away from files.

Never expectorate in dark corners.

Tuberculosis patients should always wash their teeth, mouth and hands before meals and frequently during the day.

Apartments used by consumptives should not contain carpets, unnecessary upholstery, curtains or tapestry.

Apartments which have been used by tubercular patients should be thoroughly disinfected under the direction of the health authorities or a competent physician.

Cases of tuberculosis should be reported to the proper health authorities, not for the purpose of quarantine, but for general instruction.

Those afflicted with tuberculosis should not play or associate intimately with children.

Tuberculosis is not apt to attack a person if otherwise in good health.

Have your living apartments as much exposed to direct sunlight as possible, and your sleeping apartments thoroughly ventilated.

Breathe through the nose. Children who breathe through the mouth have some form of nasal obstruction. This is dangerous to their health and interferes with their mental development.

Avoid dissipation and excess.

Remember that tuberculosis is curable, if the case comes early under the guidance of an intelligent physician.

A cordial invitation is extended to all who are interested in the prevention of this disease to become members of our Society. Membership fee, \$1.00 per year.

No Salaried officers. All money received used in preventing the spread of the disease.

The Association will endeavor to supply competent persons to present papers or deliver addresses before Societies desiring information regarding the prevention of tuberculosis.

Communications may be addressed to the Secretary of Cal. Assoc. S. & P. of Tuberculosis, 602 Johnson Building, Los Angeles, Cal.

NEWS FROM OUR SISTER STATE OF COLORADO

The editor recently spent a most pleasant and instructive day with Dr. G. Walter Holden, Medical Director of Agnew Memorial Sanatorium of Denver, in visiting the different sanatoria of that city. He hopes in a later issue to tell of some of the things he saw. At the time of this visit, Dr. Holden was deeply interested in the organization of the Colorado State Association for the Study and Prevention of Tuberculosis. We print herewith one of the excellent pamphlets which they have published:

TUBERCULOSIS

"The greatest plague in the world is Consumption, or Tuberculosis.

"It kills more people in this country each year than Typhoid Fever, Yellow Fever, Diphtheria, Bronchitis, Grip, Measles and Smallpox combined.

DEATH RATE

"It has a death rate in the United States of 150,000 persons each year, more than four hundred per day. That is to say, this one disease kills more American citizens in one day than the Spaniards succeeded in doing in the Spanish-American War. And it kills most of these people between twenty and and forty years of age; the average age at the time of death from consumption is thirty-five years. This is the age when the earning power is the very highest, when men and women have the most to live for, and are the most use to themselves and their family.

THE ECONOMIC LOSS

"Consumption represents a money loss to the country of not less than \$400,000,000.00 per year, in the death and invalidism of working citizens. This comes to \$5.00 per head per year for each man, woman and child in the nation, or \$25.00 per year for the average family. And all this loss of life and money is absolutely unnecessary; Consumption can be wiped out just as in civilized countries Yellow Fever has been wiped out.

WHAT IS TUBERCULOSIS?

"Consumption is a germ disease. It is an infectious disease. It is a preventable disease. It is a curable disease. The germ of consumption is called the Tubercle bacillus. This germ is destroyed by sunlight and fresh air; but flourishes in foul air and darkness. When it is planted in the tissues of a weak or ill nourished person, it kills that person. When it is planted in the tissues of a strong and well nourished individual the human tissues kill the germ.

WHERE DOES INFECTION COME FROM?

"Every case of Tuberculosis has been received by infection from some preceding case, either in mankind or in animals. Destroy the breeding places of the germ; discover and kill the infected animals; discover, direct and instruct the infected human beings—and you will soon see an end to the White Plague.

"This is a big task, but it can be done; and unless we are content to go on forever paying this toll of life and money, it must be done. Society must organize for war on the germ of Consumption. There is no other way. The various medicinal "cures" are frauds, every one. The let-alone policy means more cases to be let alone. The aimless dispensing of charity makes the consumptive a pauper as well as an invalid; it doesn't cure him. We must have a systematic campaign against this disease.

AN ORGANIZED CAMPAIGN

"An organized campaign against Tuberculosis must begin with the educating of the public. This means you. When people understand the situation they will wake up and take an interest in the war on Consumption. This again means YOU. When YOU are awake, when you understand the situation, you will take part in the war. You will help to get legislation that will enable us

to wipe out the plague spots where the disease flourishes, where the germ is bred for export. You will make a fight to get a clean, uninfected food supply; and you will support every organization that is doing service in this war.

THE INTERNATIONAL CONGRESS

"Next September the International Congress on Tuberculosis meets in Washington, D. C. It is the most learned, the most influential, the most experienced organization on earth in dealing with Consumption. It meets to compare notes on science and administration, to suggest reforms in dealing with the disease, and to advance the war against this the worst of all afflictions to which the human race is heir.

WILL YOU HELP?

"Will you help to make this Congress a success? It is working for you, will you work for it? You are paying a tax of \$5.00 a year, and every year to the White Plague. Will you pay \$1.00 this year for membership in the State Branch of the Congress which is in the forefront of the war against Tuberculosis."

If so, send your name and address to the Secretary of the State Society.

NOTE—The Secretary of the California State Association will be glad to forward contributions, or they may be sent direct to the Secretary-General of the International Congress on Tuberculosis, Dr. John S. Fulton, 714 Colorado Building, Washington, D. C.

THE STATE OF WASHINGTON HARD AT WORK

From the second number of the "Pacific Coast Journal of Tuberculosis," an interesting four-page publication, which is the official organ of the Washington Association, we clip the following, showing what that State is striving to do in the way of ridding Washington of Tuberculosis:

"The Washington Association for the Prevention and Relief of Tuberculosis takes part in a very general movement directed toward the prevention of tuberculosis. The National Association for the Study and Prevention of Tuberculosis has been in existence since 1904. On lines suggested by the National Association, the Washington Association was formed at Spokane, September 12, 1906. This Association endeavors to include and to crystalize all forms of effort within the State directed against the spread of tuberculosis. It numbers among its officers and board of directors physicians from all sections of Washington, and in addition, prominent laymen who promise to aid in every possible way. The Association purposes to promote and foster local associations and societies in as many communities as possible, which shall constantly be at work following out approved methods, both popular and scientific, in a general and systematic campaign against the disease. It was recognized from the outset that the objects of the new organization could only be attained through the co-operation of the laity with the medical profession, and this co-operation is emphasized both in the membership and work of the Association. Any persons in the state of Washington may be a member of this Association upon the payment of \$1.00 each year.

"It is hoped by various means to educate the public as to the great prevalence of tuberculosis; that the deaths from tuberculosis, amounting to 150,000 every year in the United States, are needless; that the misery and loss resulting from the disease can be avoided; and that with organized action and the observation of proper hygiene, tuberculosis can be practically stamped out.

"Statistical investigations in regard to the incidence and mortality of the disease and its relations to various trades and occupations will be undertaken and pushed as rapidly as the resources of the Association will permit.

"During the past year local societies have been formed in Tacoma and Everett.

"The first annual meeting of the Association was held in Seattle at the Y. M. C. A. Auditorium on February 19th, and was largely attended. A tuberculosis exhibit has been collected and was shown at the first annual meeting. An

interesting array of facts was presented through charts, in regard to the incidence and mortality of tuberculosis in Washington. Models of tents, bungalows, a lean-to, and a large number of photographs were also exhibited. The Association owns a collection of about eighty lantern slides which illustrate the dangers of overcrowding and unsanitary conditions and which also show modern out-of-door methods of treatment of the disease.

"The funds of the Association are derived from membership dues and voluntary contributions.

"No one of its officers is paid any salary whatsoever.

"The work of the Association and the results to be accomplished are only limited by the funds available, and all those who are willing to co-operate are invited to contribute to the funds of the Association or to apply for membership."

NOTES OF THE WORK

At a recent meeting of the San Francisco Society the following were elected members of the Board of Directors:

A. W. Scott	Dr. William C. Voorsanger	Chas. Bentley
Chas. C. Moore	Dr. Herbert C. Moffit	H. W. Brandenstein
Mrs. J. F. Merrill	Dr. C. M. Cooper	J. J. Bakewell
Mrs. S. S. Palmer	Dr. R. Bine	Gustave Brenner
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Dr. A. W. Hewlett	Waiter McArthur	Miss McKinstry
Dr. Geo. Evans		Thomas E. Hayden

The editors will deem it a great favor if the secretaries and other officers of the different city organizations will send us notes on their work. Particularly do we request to be kept informed of changes in the lists of officers.

It is proposed to have a tuberculosis exhibit at the next State Fair at Sacramento and to send this to different parts of California. Dr. N. K. Foster, the Secretary of the State Board of Health, is at work on the plans now.

The people of California are under great obligations to the State Board of Health, consisting of Doctors Martin Regensburger, Wallace A. Briggs, F. K. Ainsworth, A. C. Hart, O. Stansbury and W. LeMoyné Wills, for the efficient services rendered by the Board in promoting anti-tuberculosis work throughout the Golden State.

If you have friends who may become interested, or know of persons to whom this Bulletin could be of service, send their names to the secretary of the State Association.

We wish every member of the State or Affiliated City Societies to send us news items or other contributions on the work.

In our next issue we hope to print a roster of our members. Will the local secretaries please take note of this?

VISITATION OF CONSUMPTIVES

The care of consumptives includes not only medical treatment and advice, but among the poorer classes, it is necessary to enter the homes of the sick to teach the patients how to care for themselves, and to protect the health of the other members of the family.

A form of report which we have devised for the visiting nurse of the Helping Station of the Los Angeles Society may be of interest. If any of the component societies wish copies of this form, if they will send in their order at once, we will try to have them printed for the cost of paper and presswork, before the type is distributed.

HELPING STATION, LOS ANGELES SOCIETY FOR STUDY AND PREVENTION OF TUBERCULOSIS

SURNAME			GIVEN NAME		STREET		NO.		Refer to History Number			
Age		Nativity Patient		Nativity Parents						Ward		
How Long in U. S.			In Cal.		In L. A.							
Came to Cal. from where			Came to Cal for Health									
Single		Married		Wid.		Separated		How Long				
Disabled		Totally Partially		How Long								
Occupations		Former Present										
Cases Tuberculous Among		Relatives Intimates Fellow Workers In the House										
How or from whom was Disease Contracted												
Intemperate Habits		Patient Parents										
Earns at Present		Earned Previously										
Material Circumstances												
Has been in what Institutions			When									
Charitable Aid by			When		What Aid							
Cell. Settlement		Assoc. Char. Lodges		Assist. League Insurance								
Churches		Benev. Org.		Benev. Persons								
Diag. Tub.		Stage		oFever		Bac.						
Physician		Address										
Date of this History and Visit												
Landlord's Name			Address									
Signature Nurse												

FOOT-NOTE.—Nurse will underlines or place a cross after items which exist. Subsequent visits should be noted on the back of the card, giving date, changes and other items of interest.

SPECIAL NOTICE

We call the attention of our readers to the following letter, anent the International Congress, which meets at Washington, September 21st to October 12th, 1908. The message speaks for itself:

The International Congress of Tuberculosis }
 Office of the Secretary-General }
 Suite 714 Colorado Building, }
 Washington, D. C., June 8, 1908 }

Will the American membership of the International Congress on Tuberculosis be large enough to justify our having asked the Congress to meet in America? Shall we deserve the good opinion of our guests from France, Germany and England, if there are relatively fewer Americans in the American Congress than there were of Frenchmen in the French Congress, or of Germans in the German Congress, or of Englishmen in the British Congress?

After the International Congress is over shall we be satisfied with our part in it? Americans of this generation will have but one chance to profit by a World's Parliament of this sort, in our National Capital. And when it has passed into history, shall we find that we have been awake to our opportunity? Unless values are created before the Congress, there will be no profits to be counted afterwards.

Who will carry to your people the vitalizing message of the Congress? You? If not you, then who? The time for action in this matter is that instant in which you first realize the significance, the swift approach and swifter passing of this unique opportunity.

Yours very truly,

JOHN S. FULTON,
 Secretary-General.

NOTE.—Membership in the Congress with reports of all proceedings can be obtained for \$5.00; Associate Membership, \$2.00. Subscriptions may be sent to Dr. John S. Fulton, 714 Colorado Building, Washington, D. C. The California committee consists of Dr. N. K. Foster, Sacramento, chairman; Dr. F. M. Pottenger, Los Angeles, secretary; and Doctors W. J. Barlow, Norman Bridge, G. H. Evans, W. H. Flint, H. C. Moffitt and A. R. Ward.

Vol. 1, No. II.

September, 1908.



The Bulletin

OF THE

California Association for the Study and Prevention of Tuberculosis.

A BI-MONTHLY PUBLICATION

(Entered as second-class matter at the Alhambra Postoffice, Alhambra, Cal.)

The aim of this publication is to promote the study and dissemination of knowledge concerning the prevention and cure of tuberculosis, to aid in the establishment of institutions intended for those purposes, and to co-operate with such organizations as can render aid in the solution of the tuberculosis problem.

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Editorial contributions may be sent to care of Dr. Boardman Reed, Manager, Alhambra, Cal.

Office of Publication: 206 West Main street, Alhambra, California.

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HOW PERSONS SUFFERING FROM TUBERCULOSIS CAN AVOID GIVING THE DISEASE TO OTHERS.*

It is now universally conceded that pulmonary tuberculosis, or as it is usually termed, consumption, is an infectious disease and sufferers from the malady are responsible for its extension to healthy individuals. By this statement it is not meant that tuberculosis is communicable like smallpox or scarlet fever, as with proper precautions there is little or no risk of infecting the attendants or friends of tuberculous patients. In hospitals and sanatoria devoted to the care of tuberculous patients, and conducted on approved methods, the disease does not affect nurses or others coming into daily contact with the patients.

The bacilli which induce the disease are found in enormous numbers in the sputa of the patients, especially in the advanced stages of the disease. If these bacilli are inhaled into the lungs the disease is apt to ensue. So long as the sputum is moist there is no risk, but when dry the bacilli float in air and dust and if inhaled into the lungs may cause infection of a healthy person. Houses and rooms are readily infected by dried tuberculous sputum and form a menace to those occupying them. The patient himself may have areas of healthy lung infected by breathing in this bacilli-laden dust.

The first care which the tuberculous patient must exercise is therefore, *never to spit about a room, in halls or passages, or in public conveyances.* The sputum is *best* received in a spittoon containing water, or *better still* in a solution of pure carbolic acid (1 part to 20 parts of water), care being taken not to soil the cover or top of the vessel. The spittoon should rest on a sheet of paper to prevent stray particles of sputum from lodging on the floor. When the spittoon is emptied it should be thoroughly cleansed with boiling water containing washing soda.

Small pocket spittoons are obtainable with a spring cover which may be used by patients who are not confined to their rooms. Such a cup is easily concealed in a handkerchief.

Pocket and portable spittoons or cuspidors may be procured at small cost. These are absolutely hygienic.

The folds of a newspaper answer the purpose of a spit cup very well if the paper is burned before the spittle has had time to become dried up in it.

Instead of using handkerchiefs it is preferable to employ small rags or pieces of cheese cloth, which may be wrapped in paper and burnt. Care must be exercised to avoid soiling pillow covers and bed clothing with expectoration, and men should shave the face to prevent the germs of the disease from clinging to the hair. During cough a piece of moist rag or cheese cloth should be held before the mouth to prevent the germs of the disease, which are then expelled as a fine spray, from infecting the room.

A separate bedroom should, if possible, be occupied by the tuberculous patient, and under no circumstances should the bed be shared by another sleeper. The room should be bright and well aired, and the habit of sleeping with an open window should be cultivated. Provided there is no draught and plenty of warm bed clothing, there is no danger of catching cold, even in winter.

Dark rooms not only form a menace to the healthy, but are injurious to the patient himself, as fresh air and sunshine are the best agents we have for destroying the vitality of the germs of the disease.

Unnecessary carpets or heavy curtains should be removed, and the floor left bare or covered with a piece of oilcloth. In cleaning the room a damp

*Pamphlet issued by the Montreal League for the Prevention of Tuberculosis.

floor cloth must be used to avoid scattering the germs through the air of the room.

Ben linen, handkerchiefs, etc., should be disinfected by boiling. Such articles when soiled by sputum readily infect a room.

From the statements made above the tuberculous patient will understand that he owes it to himself as well as to others to be scrupulously careful in the care and disposal of sputum. Could this secretion be immediately destroyed tuberculosis would soon cease to be a prevalent and dangerous malady.

REGIMEN OF LIFE FOR THE TUBERCULOSIS.* (CONSUMPTIVE.)

People who cough or take cold easily and frequently should follow a system of hygienic living, the cardinal points of which are:—OUTDOOR LIFE—ABUNDANT and NUTRITIOUS FOOD—ABSOLUTE REST—and MEDICAL SUPERVISION. Let us discuss each one of these points separately.

OUTDOOR LIFE:—By this is meant the spending of not less than eight hours daily in the open air. It also means that one should never remain in a room or house without ventilation. This is best assured by the "open window," summer and winter. You must live in pure, fresh air NIGHT and DAY, preferably in the country. (The NIGHT air is beneficial; keep your window open.) In order to carry out fully this regime, you must avoid crowded halls or gatherings of any sort; no saloons, dancing halls, smoking-rooms, crowded theaters or public meetings in enclosed spaces.

ABUNDANT AND NUTRITIOUS FOOD:—Much food is required to keep up the nutrition, and must be taken at more frequent intervals than in health. The average dietary should be about the following: Upon first awakening one should swallow a raw egg (fresh) with a dash of lemon juice, taking care that the yolk of the egg remains unbroken, and swallow without breaking, as one would a raw oyster. Instead of rising at once, it is well to remain in bed twenty minutes or half an hour after taking the egg. The regular breakfast should then be taken according to the habit of the person, about one hour after the egg. During the forenoon, if thirsty, it is well to drink slowly a tumbler of milk. Before the mid-day meal, or just as soon as one sits down to take it, another raw egg with lemon juice is a very good appetizer. In the afternoon, cold milk or hot tea with a biscuit, bread and butter, etc., should be taken. The evening meal should not be too copious, yet sufficient to satisfy. Before retiring, hot milk or an egg-nogg will usually secure a good night's rest. Your attending physician will tell you what special diet you need besides.

ABSOLUTE REST:—This is a much abused term. It may mean much or little. The accompanying illustration is the literal acceptance of the term.

The variations between the extremes are very great, and by rights, the organs of speech should participate in the "rest cure." Sittings in the long chair must be broken at intervals by walks of one hundred steps and possibly more, if the attending physician advises it. The return to active life and exercise should be gradual and very slow indeed, and never attempted without the consent of the attending physician.

MEDICAL SUPERVISION:—This is no doubt the most important of the points to be considered. The symptoms vary in lung disease from week to week, and these must be treated intelligently. Only the conscientious physician can do this. He is interested in your welfare whether you can pay him or not. You cannot be too strongly enjoined not to have anything to do with patent medicines, nostrums, etc., for when you realize that you may have cause to regret your action, it will likely be too late for you to give warning to others.

*Pamphlet issued by the Montreal Board of Health.

Trust to your physician, and you will find him the stoutest friend you have. His interest in you is not likely to cease when your means are exhausted.

The greatest danger to one suffering from lung disease is that of reinfection. In this the patient is a danger unto himself, for his expectoration, if not safely destroyed, is a constant menace to him. In order to guard against reinfection you must never spit in your handkerchief or swallow the expectorated matter. Always use a cuspidor specially designed for the purpose.

During the spells of coughing it is very important that a linen, gauze, or other kind of rag moistened with some mild antiseptic solution be held before the mouth so as to prevent the bacilli-laden particles from being projected into the air, and thus becoming a source of danger. Avoid coughing except when it is absolutely necessary. **THIS IS VERY IMPORTANT.** Smoking and the unwarranted use of stimulants are both to be discouraged. Never get "TIRED" or "OUT OF BREATH." If you are doing anything, stop the moment you begin to perspire. Keep your feet and body dry. You may "take the cure" in any sort of weather if your body is protected from wind and rain. You can recover your health in any climate, although it is generally conceded that cures obtained in cold climates are more likely to be permanent. *You must sleep alone.* Always breathe through the nose, and occasionally you should take three or four deep breaths, in the fresh air, very **SLOWLY.** Life in the country is to be preferred because of the purity of the air.

THINGS THAT RESIDENTS OF HEALTH RESORTS SHOULD KNOW ABOUT TUBERCULOSIS.*

THE SOURCE OF DANGER.

The sputum of tuberculous persons, whether in the early or late stages of the disease, contains the bacilli which are the germs of the disease, and it is practically the only source of danger.

The milk of tuberculous cows is liable to contain the bacilli.

HOW THE GERMS MAY BE CARRIED.

By means of the sputum carelessly spat upon the floor, walls or furniture of a room, where it may dry and be inhaled in the dust.

By means of the sputum accidentally coughed out in a fine spray or thrown out in small particles by hawking, loud talking and laughing.

By means of the sputum spat upon verandas, steps, sidewalks or ground whence it may be tracked into the house on shoes or trailing skirts, and dry indoors.

By means of the sputum spat into handkerchiefs and cloths, which dry in the pocket.

By means of the sputum which soils the hands, lips, beard and moustache of the careless consumptive.

By means of the sputum smeared on, or coughed into, the clothing, bedding, towels, books and papers, pens and pencils of the careless consumptive.

The germs from all these sources may be breathed in or swallowed.

WHERE THERE IS NO DANGER.

The breath of tuberculous persons does *not* contain the bacilli and therefore cannot convey the disease.

There is no real danger of inhaling the bacilli out of doors, in the streets, or on verandas of houses, they are scattered to the winds and killed by the light.

There is little foundation for the fears of infection from the dust in the open air; the danger is indoors.

*Pamphlet issued by the Saranac Lake Society for the Control of Tuberculosis.

WHERE THERE MAY BE DANGER.

Indoors, wherever tuberculous persons are coughing and spitting without taking any precautions, and where there is no ventilation.

In rooms which have been recently occupied by such persons and not properly fumigated and cleansed.

From handkerchiefs and other articles handled by careless or dirty persons, which are not disinfected.

From unwashed table utensils used by tuberculous persons.

From raw milk of tuberculous cows and food handled by dirty persons who have consumption.

WHAT IS THE ACTUAL DANGER TO RESIDENTS OF A HEALTH RESORT?

The experience of health resorts in America indicates that there is but little danger to the resident population from the presence of tuberculous persons.

Very few develop the disease and these cases are not generally traceable to contact with consumptive guests. No employee of the Adirondack Cottage Sanitarium was ever known to contract the disease.

It requires prolonged and close contact indoors with careless or dirty patients to infect healthy adults. Only delicate persons or those who are temporarily ill are in danger from the ordinary contact with patients indoors.

Children under fifteen are especially liable to get the infection if exposed when suffering from children's diseases, such as measles, scarlet fever, whooping cough, colds and enlarged tonsils or glands in the throat.

The danger is chiefly to young children who are in close contact with parents or persons who care for them and have consumption. Young infants are far more easily infected than adults by swallowing the germs; hence the danger is greatest to them from this source.

HOW DANGER MAY BE AVOIDED.

1. By insisting that every guest who comes for health reasons shall observe the rules concerning cough and expectoration as required by the laws. These laws require that no one shall spit in any public place indoors or outdoors, except into some proper receptacle.

2. By everyone setting the example of obedience to the same laws, and instructing children to do the same;

3. By providing paper cuspidors for, or causing them to be obtained by, the guests who expectorate, and by arranging for a place in which to burn them.

4. By prohibiting the use of slop jars, wash bowls or other vessels, except water closets, to receive expectoration.

5. By suggesting in the place of ordinary handkerchiefs, the use of gauze, cloths or paper handkerchiefs, one for the nose and a separate one for holding before the mouth and nose while coughing and for wiping the lips after spitting. These should all be burned.

6. By refusing to permit handkerchiefs used by tuberculous patients to be left about the rooms, in closets or bureau drawers, or to be laundered unless first disinfected by 5 per cent. phenol (carbolic acid).

7. By directing that all cuspidors and cloths be placed in paper bags or newspapers in preparation for burning.

8. By providing rooms with rugs, and furniture that can easily be wiped and that does not catch dust; also with windows that can be opened top and bottom and that receive sunlight.

9. By having the sleeping-rooms fumigated as directed by the Board of Health and then thoroughly cleansed with soap and water, while the rugs and blankets are to be aired.

10. By reporting any persons who are not cleanly in habit or are careless or indifferent about the sanitary rules, to their physician, or if they have no physician, to the Board of Health for instruction or discipline.

11. By keeping children out of the sleeping-rooms of invalids who cough and from close contact with them anywhere indoors.

12. By discouraging the giving to children of candy, fruit or other articles handled by invalids; also cups, tumblers, spoons and forks unless cleaned with soap and boiling water.

SOME SUGGESTIONS WORTH REMEMBERING.

1. That tuberculosis is not, after all, a contagious disease—i. e., a pest like smallpox, diphtheria or measles.
2. That exaggeration of the danger of infection leads to neglect and recklessness on the part of invalids, as well as needless distress to the visitors.
3. That tuberculous persons are human and should be treated with consideration and encouraged to follow rules for their own good.
4. That the disease is not easily developed in healthy people, especially adults who are constantly with tuberculous guests.
5. That the sanitary rules are intended for the good of all, and are the best that science and common sense can devise.

As this number of THE BULLETIN goes to press the International Congress of Tuberculosis, which convenes at Washington September 21 to October 12 inclusive, is occupying the attention of the entire civilized world.

The delegates appointed by the California Association include the following:

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Dr. E. Rixford.
Dr. J. H. Barbat.
Dr. James A. Block.

LOS ANGELES:

Mr. C. B. Boothe.
Dr. George L. Cole.
Dr. W. Jarvis Barlow.
Dr. George H. Kress.
Dr. W. LeMoyne Wills.
Dr. L. M. Powers.
Dr. D. C. Barber.

PASADENA:

Dr. F. C. E. Mattison.
Dr. A. T. Newcomb.
Dr. Norman Bridge.
Dr. W. A. Ross.

MONROVIA:

Dr. F. M. Pottenger
Dr. C. C. Browning.

RIVERSIDE:

Dr. W. W. Roblee

SACRAMENTO:

Dr. N. K. Foster

BERKELEY:

Dr. A. R. Ward.

SAN DIEGO:

Dr. Fred Baker.

REDLANDS:

Dr. Gayle Moseley.

STANFORD:

Dr. W. F. Snow.

In our next issue we hope to publish the reports of our delegates.

In this issue, we content ourselves with presenting some brief monographs on prevention and the hygienic-dietetic treatment which we hope will be of interest to our readers.

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to the secretary,

Dr. George H. Kress,
 240 Bradbury Bldg.,
 Los Angeles, California.

Until our State is educated concerning
 the tuberculosis problem, the work
 must be carried on through private
 subscriptions. Your membership fee
 will help distribute many pieces of
 literature to those who sadly need it.



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Editorial contributions may be sent to care of Dr. Boardman Reed, Manager, South Granada Ave., Alhambra, Cal.

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THE SIXTH TRIENNIAL INTERNATIONAL TUBERCULOSIS CONGRESS

The BULLETIN this month presents a number of articles on the recent International Tuberculosis Congress which was held at Washington, D. C., September 21st to October 12th, inclusive. A request for articles was sent to all our delegates and we print those which were received by us. They tell a story of great interest.

It was the common consensus of opinion that the exhibit and the programs given were truly wonderful. Universal regret was expressed that it was not possible to make the remainder of the country realize the significance of the anti-tuberculosis warfare, as it was appreciated by those who were in attendance at the Congress.

The number of members enrolled exceeded 6000, and the attendance was splendid. The published report of the proceedings will be awaited with much interest.

The resolutions finally adopted by the Congress read as follows:

RESOLUTIONS BY THE CONGRESS.

"The resolutions in full follow:

"RESOLVED, That the attention of State and central governments be called to the importance of proper laws for the obligatory notification by medical attendants, to the proper health authorities, of all cases of tuberculosis coming to their notice, and for the registration of such cases in order to enable the health authorities to put in operation adequate necessities for the prevention of the disease.

"RESOLVED, That the utmost efforts should be continued in the struggle against tuberculosis to prevent the conveyance from man to man of tuberculous infection as the most important source of the disease.

"That preventive measures be continued against bovine tuberculosis, and that the possibility of the propagation of this to man be recognized.

"RESOLVED, That we urge upon the public and upon all governments the establishment of hospitals for the treatment of advanced cases of tuberculosis.

"The establishment of sanatoria for curable cases of tuberculosis.

"The establishment of dispensaries and day and night camps for ambulant cases of tuberculosis which cannot enter hospitals and sanatoria.

LEGISLATION THAT IS INDORSED.

"RESOLVED, That this congress indorses such well-considered legislation for the regulation of factories and workshops, the abolition of premature and injurious labor of women and children and the obtaining of sanitary dwellings as will increase the resisting power of the community to tuberculosis and other diseases.

"That instruction in personal and school hygiene should be given in all schools for the professional training of teachers.

"That whenever possible, such instruction in elementary hygiene should be intrusted to properly qualified medical instructors.

"That colleges and universities should be urged to establish courses in hygiene and sanitation, and also to include these subjects among their entrance requirements, in order to stimulate useful elementary instruction in the lower schools.

"That this congress indorses and recommends the establishment of playgrounds as an important means of preventing tuberculosis through their influence upon health and resistance to disease."

CALIFORNIA AT THE INTERNATIONAL TUBERCULOSIS CONGRESS.

In comparison with the showing made by other States at the recent International Tuberculosis Congress, the exhibit of California was not particularly praiseworthy. And comparing the importance which the tuberculosis problem occupies in the Golden State, with the statistical and other evidence presented by this commonwealth at Washington, the result was by no means creditable to us. This deficiency is to be explained by the fact that only in the last few years has the California State Board of Health been so constituted as to carry on public health work to the best advantage. With the great mass of other work to be done, and the very limited appropriations to the department, the statistical work has had to wait.

The lesson to be learned here, is that at the next session of the Legislature we should give our hearty support to all efforts to secure adequate appropriations for the State Board of Health.

Exhibits were made by the State Board of Health, by the California Association for the Study and Prevention of Tuberculosis and by the Barlow and Pottenger Sanatoria. The attendance of delegates from this State was most excellent. This issue prints some of the impressions of several of our Southern California representatives.

In Competition II, for the best exhibit of an existing sanatorium for the treatment of curable cases of tuberculosis among the working classes, the highest prize was divided between the White

Haven Sanatorium of Pennsylvania and the Brompton Hospital of England, the Barlow Sanatorium of Los Angeles securing an "honorable mention."

A special silver medal was also awarded the Barlow Sanatorium for its admirable models in regard to excellence in detail, construction and installation.

In Competition VII, for educational leaflets entered under assumed names, the leaflet for mothers, limited to one thousand words, and signed "Develop Healthy Bodies," written by Dr. George H. Kress of Los Angeles, was awarded the gold medal; and the leaflet for teachers, limited to two thousand words, which was signed "The Teacher an Important Factor," and which was also written by Dr. Kress, was awarded the silver medal.

THE PLACE GIVEN SANATORIA IN THE FIGHT AGAINST TUBERCULOSIS.

That Sanatoria have come to stay, that they are recognized by all as probably the best method of treatment, and that they are a great factor in the education of every community in which they are placed, was impressed upon the great gathering at Washington by the papers of sanatorium men from all parts of the world. Although sanatorium treatment may be carried out successfully in the home by proper medical supervision, the most satisfactory results reported came from Sanatoria. The regulation of the daily life, the education in hygiene, healthy regular habits, the amount of rest and exercise for a tuberculous patient, the proper diet, and

special treatment, all so difficult to obtain elsewhere than in Sanatoria, were pertinent facts forced upon all.

With our recent knowledge and the manner of handling consumptives, it is now well recognized that other methods of cure may be used with equal advantage. In other words, at the Congress the sanatorium has taken another place; it no longer occupies the center of the stage, but takes its place among the larger group of curative and preventative methods. Such a group is necessary in every large community for the prevention and eradication of tuberculosis; a group that consists of a well-organized dispensary, visiting and district nurses under settlement work, hospital for the advanced cases, a sanatorium for the curable cases whether early or advanced, a day and night camp, a health board which works in conjunction, and a farm for convalescents. In such a working force the dispensary should occupy the central position, and never stand alone. Phillip of Edinburgh emphasized this idea most strongly and said: "The dispensary should be a sort of clearing-house; it should be related to the various departments and an investigating bureau." Where the dispensary has these connecting links, it is possible by separating and directing the patients to individualize for the best interests of each case. In operating such a system it will be found that some may be well cared for at the dispensary; the stronger and those who must work may receive the necessary instruction at a night camp; those who cannot leave their homes at night may have food and teaching in the day camp; some who are unable to

leave their beds or homes may be visited by the district nurse; others sent to a hospital for far advanced cases; and still others of a curable type sent to sanatoria, while convalescent or arrested cases may work on the farm to complete a cure.

Another change for the sanatorium was made by the general feeling that if prevention of the disease was to be ever realized, Sanatoria should care for more of the advanced cases, such as are clinically advanced but *not* hopeless. This was an expression of much interest to the writer, since these are the cases that when left at home are too often centers of infection but when taken away from their families and poor surroundings prevent sources of infection, and the saving of many lives. It was urged that we need more of these institutions, hospitals and sanatoria, for advanced cases, which, when properly conducted are, in truth, schools of education where the principles and practices of hygiene are taught and passed on to others who are reached by no other means.

Since sanatoria have made such excellent records and shown undisputed good results with the early cases that they are recognized by all as the best method of treatment, they can afford to admit more cases that need isolation and are not of the earliest type of the disease, without lessening their strength. Even if the results of cure be less brilliant, the greater good for eradication and prevention of the disease will result.

A strong plea was made to establish working farms, where the arrested or cured cases of the working classes from

a sanatorium could go and complete the cure under supervised labor, since it is recognized that the working classes must return too quickly to strenuous life and often to poor surroundings, while the well-to-do on leaving a sanatorium have a better chance of keeping well.

From the expression at the Congress, it is quite evident that sanatorium treatment will include less rest cure than heretofore. As rest is essential early in the disease, so it is found that work at later periods is necessary to help regain a healthy body. Just when rest or work is proper for the case must be left to the attending physician. Graduated work or labor is prescribed and increased until the hardest labor may be accomplished, similar to the method of graduated labor so successfully carried out at the Frimley Sanatorium in England. When work or labor is prescribed, the temperature and clinical symptoms are carefully noted and watched.

The construction of sanatoria was a feature of much interest. As education of the patients is a necessary factor, a sanatorium should not be built on the plans of a general hospital, but receive the details of an outdoor life. Since patients must remain months under observation, the place should take on more of the home atmosphere, be made comfortable, attractive and simple with luxuries avoided. Construct the buildings and rooms with reference to plenty of light, air, and sunshine. Porches for beds should be connected with the rooms or wards, or there should be open air cottages. In cold climates, such porches may have glass enclosure for

protection in the severe weather. Tents are not recommended as they are too hot in summer and too cold in winter. For compactness, two stories with similar porches may be built; and for economy, eight to ten patients may sleep on the same porch. The location should be selected with a thought to absence of winds, dust, noise and smoke, accessibility and future extension. It is wiser not to care for too many patients at one sanatorium, a good limit being 100.

There are more than 100 free sanatoria in Germany, with an average of 100 patients each, and Pannwitz of Berlin says that the cost of erecting such sanatoria need not exceed \$1000 a bed. Others have put the cost at \$500 a bed, which is a low average. Carrington was able to show that the cost in New Mexico, by using tents, was \$150 a bed.

To emphasize the need of sanatoria in every community, one of the resolutions passed at the Congress was: "That we urge upon the public and upon all governments the establishment of hospitals for the treatment of advanced cases of tuberculosis; the establishment of sanatoria for curable cases, and the establishment of dispensaries and day and night camps for ambulant cases of tuberculosis which cannot enter hospitals and sanatoria."

W. JARVIS BARLOW.

TUBERCULIN FROM THE STANDPOINT OF THE IN- TERNATIONAL CONGRESS.

While the greatest good that will come from the International Tuberculosis Congress, which met in Washington September 21 to October 12, will

undoubtedly be the great stimulus which will be given to the cause of the prevention of tuberculosis, yet the gathering was notable for other things as well. There was a general crystallizing of thought along the lines of infection, prevention and cure, which will undoubtedly influence the work of many investigators and clinicians during the coming years.

The attitude of the Congress on tuberculin was especially noteworthy. Tuberculin as a therapeutic agent has been gradually gaining favor during the past ten years, and during the past two or three years it has progressed beyond expectation. Not only has much of the fear which was formerly attached to it during its gross misuse in the early nineties disappeared, but many who, at that time discarded it, are now employing it. At the present nearly all tuberculosis specialists are favorable to the employment of tuberculin, and most of them are using it. Few well-regulated sanatoria today fail to give their patients the benefit of tuberculin treatment. At the Congress, it is especially worthy of mention, that there was scarcely a word of disapproval uttered against this therapeutic agent.

This reversal of opinion comes from a better understanding of tuberculosis, a more thorough comprehension of the subject of immunity and its production and a better appreciation of the splendid clinical results which have been produced by those who have been giving their patients the benefit of tuberculin treatment during the past seventeen years.

Many who are now convinced of the value of tuberculin would still be

doubters, if its beneficial results had been confined to the treatment of pulmonary tuberculosis; for this complex disease, with its variability in symptoms and course still remains a closed book to many, even of our brightest men; but, when tuberculosis of the larynx which can be watched from day to day in the laryngeal mirror is seen to yield, when the effusions in tuberculous pleurisies and peritonitis are seen to disappear without aspiration or operation, when tuberculous glands and even the sinuses resulting from their spontaneous rupture or those remaining after operation are seen to heal, when lesions of the bones, genito-urinary tract, ear and eye are all seen to get well under tuberculin treatment, proof of its value is furnished which can not be denied.

The scientific world now recognizes tuberculosis to be the same disease no matter where the lesion is located. Tuberculosis of the lungs, larynx, intestines, genito-urinary tract, bones, glandular system, eye, ear, or skin are all the same pathological process and the cure of all these affections is the same—the establishment on the part of the affected organism of an immunity to the tubercle bacillus and its toxins.

The action of tuberculin is based upon a fact which has been well established by workers in the field of immunity, viz: a specific poison stimulates the body cells to the formation of specific protective substances. Thus typhoid toxins will stimulate to the production of specific typhoid antibodies, staphylococcic toxins to specific staphylococcic antibodies, tubercle bacillus toxins to

specific antibodies against the tubercle bacillus.

Not only will these specific toxins stimulate the body cells to the production of specific antibodies, but without them there can be no specific antibodies produced; so if a patient recovers from tuberculosis without the therapeutic use of tuberculin, he does so because he has produced his own toxins (tuberculin) which stimulated the cells to the formation of protective antibodies. He can not get well without tuberculin; he must either form his own in the focus of infection or must receive it from without. For certain reasons which we cannot discuss here the patient often fails to produce his own tuberculin and can only be cured by artificial injections. It was the consensus of opinion of the Congress that tuberculin in the hands of careful men is a safe remedy, but that it should not be used promiscuously. Most men believe that as yet its administration should be confined largely to institutions, where the patients are under the direct care of the physicians.

The danger which now seems to threaten tuberculin is an over-enthusiasm, which will cause it to be used by men who will neither understand it nor the disease which they are treating; thus it will be used wrongly, harm will result, and erroneous opinions will be given as to its value and danger.

F. M. POTTINGER.

A LAYMAN'S VIEW-POINT OF THE CONGRESS.

Responding to your request for "my impressions of the National Tuberculosis Congress," I may say that if I should attempt to convey to you even a

brief summary of all the impressions which I received during the eight days that I was in attendance at the Congress, I fear it would be more appropriate to be bound in a book than to form a short article for our periodical.

I think my first impression upon visiting the Congress was one of amazement at the extent and character of what is termed "the exhibits," occupying, as they do, the entire second floor of the immense new National Museum. It would seem that no subject related, near or remote, to that of tuberculosis, had been overlooked, and the most astonishing thing was, in how many points the subject of tuberculosis in its ramifications touches the daily life of the people.

Another thought which was impressed upon me was that while the machinery of the Congress was largely in the hands of medical men, yet large numbers of the delegates from the Eastern portion of the United States were from the laity, and that all along the Atlantic border the workers and those sustaining the fight against tuberculosis were largely composed of women. This is particularly in contrast with our section, where perhaps not a dozen women in the whole state of California have interested themselves in the work, notwithstanding the fact that California by reason of the tremendous influx, sometimes estimated as high as 30,000 annually, coming into this state from other sections for climatic reasons, is more affected by the ravages of tuberculosis than any other state.

I was further impressed with the fact that this Congress would confer its

greatest benefit upon the people of the world through awakening hundreds of thousands of people to the insidious activity of tuberculosis, and causing them to take united action for the suppression of the disease. An immense amount of information brought together at this Congress will be disseminated through the printed proceedings of the Congress, and through magazines, newspapers and otherwise, all of which will start an educational propaganda that will be so far reaching as to undoubtedly cause a general movement along preventive, as well as curative lines.

The most hopeful thought which is brought forcibly to my mind is the fact that with twelve or fifteen of the best informed physicians in the State of California present at the Congress as delegates—and I may here add that the delegates from California contributed their full share in papers, debate and active work in the Congress compared with any other state or section of the world—I say with these professional men, nearly all specialists in tuberculosis, returning from such a Congress, if the State of California does not arouse itself and begin an earnest, united effort toward the establishment of the necessary institutions and other machinery for the control of this disease from legislative, municipal and individual action, I believe it will not be because the delegates to that Congress do not know what should be done and are not ready to do their part.

I hope steps will be taken at once to arouse the people and incite action along the right lines.

C. B. BOOTHE.

IMPRESSIONS OF THE RECENT WASHINGTON CONGRESS.

The sixth triennial session of the International Congress on Tuberculosis has become an item of history.

It is too soon for any one to say just how much good has been accomplished as a result of the great amount of thought, energy and money expended. Farthermore, the impressions gained by any single individual in attendance are limited, and many such impressions are liable to be erroneous. That an immense amount of work was imposed upon the local committee there can be no question, nor is it probable that any local committee could have done better under the circumstances.

The appropriation of \$40,000 by Congress, much of which was used in fitting up a building temporarily to accommodate the session, was by far too small. A commendable feature of the place of meeting is that it was large enough to accommodate all of the seven sections and to afford room for the exhibits of the various nations, and many of the States of our own Republic.

A most lamentable feature was the fact that the building was unfinished, being a temporary remodeling of the new National Museum Building, which was only partially constructed, for the accommodation of this meeting. The partitions separating some of the sections were thin wooden structures, supplemented by cloth material in some places, so that the applause in one section could be plainly heard, and served to interrupt the work of the other sections. The acoustic properties in some of the rooms were such that it was impossible

to hear many of the speakers one-third the distance of the room.

Farthermore the approach to the building was through the market place of Washington, which for filth and general unsanitary conditions would be difficult to equal in any other American city.

These circumstances were exceedingly unfortunate. It is a very easy matter to criticise; it is a much more difficult matter to care for nearly 6000 delegates and their friends in a manner satisfactory to all.

The work of the Congress was divided into two parts: The tuberculosis exhibit and the work of the various sections, of which there were seven—with chairmen as follows:

Section I—Pathology and Bacteriology, Dr. Wm. H. Welch.

Section II—Clinical Study and Therapy of Tuberculosis, Dr. Vincent Y. Bowditch.

Section III—Surgery and Orthopedics, Dr. Charles H. Mayo.

Section IV—Tuberculosis in Children, Dr. A. Jacobi.

Section V—Hygienic, Social and Economic Aspects, Mr. Edward T. Devine.

Section VI—State and Municipal Control, Surgeon-General Walter Wyman.

Section VII—Animal Tuberculosis, Dr. Leonard Pearson.

Rather of a novelty was the paper by Dr. Raw, of Liverpool, in which he made the assertion that investigations made by himself and his associates, had led them to believe that tuberculosis of the bones and joints, of the peritoneum and tuberculous meningitis were

caused by the bovine bacillus, while pulmonary tuberculosis was caused by the human bacillus. Doubtless his work will be continued along this line, and it will be very interesting to see whether this theory is accepted by others.

In connection with the Congress a series of special lectures were delivered in Washington and elsewhere by eminent foreigners.

The impression most prominent in the mind of the writer concerning the general result of the Washington Congress is the good accomplished by arousing the public through the medium of the press to a realization of the work being done by the medical profession in combating the great White Plague. It would seem that this truly altruistic movement cannot fail to enlist a more concerted action on the part of the laity to participate in the endeavor to lessen the terrible ravages of the disease. Only through the co-operation of the public can we hope to accomplish the good for which we aim, namely, the removal of tuberculosis from the list of assets of the physician.

G. L. COLE.

THE SURGICAL SECTION OF THE INTERNATIONAL TUBERCULOSIS CONGRESS.

The two most important facts or impressions constantly before the minds of the vast throng of delegates representing the principal nations of the earth at the Washington Tuberculosis Exposition were:

First, that tuberculosis is a curable disease.

Second, tuberculosis is a preventable disease.

The two proven methods of cure are fresh air or sanatorium treatment, and abundance of good nourishment. Supplementing these, but of minor importance, are medicines and tuberculin administration.

In the surgical section all speakers and writers were specific and careful to lay great stress upon the value of the above methods as adapted to surgical cases as well as non-surgical tuberculosis.

In joint or other local tuberculosis lesions, it is just as important to nurse and develop to its highest degree the physiological resistance of the body as in pulmonary tuberculosis. Absolute rest and immobilization to prevent friction of irritated or inflamed surfaces, is of the highest necessity if we would arrest further destruction of tissues or prevent metastases in tuberculous processes. While there were few new and startling surgical procedures exploited the thoroughly tried were given their true established value.

Two subjects of cerebral tuberculosis were cited where a large trephine applied to the parietal region had resulted in recovery in what are usually fatal cases. It was agreed that this treatment should be tried where a diagnosis was reasonably certain.

Tubercular hip joint abscesses should not be incised or at most only antiseptically aspirated. Over two hundred instances of sinuses about the hip joint were enthusiastically reported as having been rapidly cured by Beck's Bismuth-Vaseline injection of the proportion of 33% Bismuth.

Numerous X-ray photographs were exhibited of tortuous fistulous tracts,

whose direction of tortuosity was brought out plainly by first injecting them with Bismuth paste before the pictures were taken. Their location by this method greatly facilitates their thorough exploration and eradication.

For the immobilization of tubercular joints, plaster of paris properly applied was considered to be the best material. In marked tuberculosis of one kidney, thorough removal of the organ from the ureter should be done. The lumen of the ureter should then be destroyed by the injection into it of a few drops of pure carbolic acid. The mouth of the ureter is then sutured to the wound through which the kidney has been removed. In this situation it can be more readily discovered and removed by the aid of a second incision over McBurney's point if in the future it should prove troublesome.

Tubercular peritonitis is best treated and more certainly cured by laparotomy to permit light and air to enter the abdominal cavity.

Tuberculosis of the breast, of which a few cases were reported, of the pleura, thyroid and large cavities of the lung, may, if favorably situated, be cured by operation.

Conservative treatment before the age of fifteen should be thoroughly tried, especially in osseous tuberculosis. If it fails or the subject is an adult, success is most surely attained by the thorough use of the knife, chisel and curette. These to be followed up by proper nourishment and outdoor life in the best climate obtainable.

D. C. BARBER.

FACTS A MOTHER SHOULD KNOW CONCERNING TU- BERCULOSIS.*

Tuberculosis a Disease Responsible for Untold Sorrow to Mothers.

Tuberculosis or consumption is a disease which robs the mothers of the world of one out of every ten children.

The causes of this disease are known, likewise the means whereby it may be prevented.

Every mother owes it to herself and her family to know about tuberculosis, so that the lives of her children may not be placed in peril.

The Frequency of Tuberculosis.

In the United States more than 150,000 persons die every year from tuberculosis. The great majority of these persons are in the prime of life. Many of these persons are married and their untimely deaths mean dependent families to be cared for by the State.

The loss in money to the United States from these preventable deaths every year amounts to more than three hundred million dollars. The suffering caused by the disease it is impossible to estimate.

Two Important Facts About Tuberculosis.

Tuberculosis is preventable.

Tuberculosis is curable.

These are most important facts worthy of widest circulation, especially since contrary ideas prevail.

Universal prevention and cure of this disease will result only when there is universal effort against it.

In this work of prevention and cure, the mothers of the world can wield a tremendous influence.

*This "Leaflet for Mothers" was entered under the name "Develop Healthy Bodies" in the competitive exhibit of the International Tuberculosis Congress at Washington by Dr. George H. Kress of Los Angeles and was awarded the gold medal.

The world counts on the aid of the mothers, for what mother would condemn either her own or any other child to an unnecessary death?

What Are the Causes of Tuberculosis?

First, there is an exciting cause, which is a very small plant called a germ. There can be no tuberculosis unless this germ be present in the body.

Second, the person who takes this disease has a body that is favorable to it. Any person whose health and strength is run down is predisposed to tuberculosis, because in such a person there is not much resistance.

The two things necessary, then, for tuberculosis are the presence of a certain germ in the body of a person whose health for any reason has been run down.

What the Germ Does in the Lungs.

When the germ gets into the body of a person who is run down in health, it finds a soil suitable for its growth and produces the disease called tuberculosis.

The germs produce little granules called tubercles, which may later become little ulcers or abscesses.

Poisons are also thrown out by the germs and get into the blood and these poisons cause most of the symptoms of the disease.

What Are the Symptoms of Tuberculosis?

The symptoms are different according to the stage.

It is the symptoms of the early stages that should be learned, for it is then that cure can be brought about and lives saved. What are these symptoms?

This disease usually comes on in very slow and mild fashion. That is what throws the persons infected off their

guard. There may be nothing more than a tired feeling, especially after work, a lessened appetite, some loss of weight and perhaps an occasional cough.

As the disease grows worse, these symptoms do likewise. The loss of weight may be very noticeable, there may be fever and night sweats. With the more frequent cough much sputum may be expectorated.

In the far advanced stages some of these symptoms like cough, loss of weight and fever, may be very pronounced. Then we have the picture of the "consumptive."

How May Tuberculosis Be Prevented?

Tuberculosis is prevented by doing two things:

1. Killing the germs that cause the disease.
2. Having people become healthy, so that they will not be predisposed to the disease.

How Are the Germs to be Destroyed?

The germs are scattered far and wide in the sputum which is coughed up by consumptives. One consumptive can cough up in a single day several billion of these germs.

When this sputum dries as dust, the germs are blown about in all directions to get into the air we breathe and on the food and things we eat and handle. In this way every person at some time in life probably gets the germs into his body.

To destroy these germs, all that is necessary is to destroy the sputum.

If sputum be coughed into paper cups or napkins, these can be burned and the germs destroyed. For spittoons, disinfectant solutions like lye should be used.

Coughing in people's faces or spitting on the streets and especially on floors is dangerous.

How May the Predisposition of a Weakened Body Be Overcome?

Bodily weakness, that is, the predisposition to tuberculosis, may be overcome by right living, particularly by breathing pure air, eating nourishing

food and getting the proper proportion of rest and exercise.

A child weak at birth should be guarded and as it grows older made to spend much time out of doors.

Children weak from diseases like measles or whooping cough should not be neglected. These and kindred diseases are often responsible for tuberculosis being set up later on in life.

Children should not be made to work at too early an age, nor allowed to study so hard as to interfere with health.

The food should be eaten slowly, and should always be nourishing. If cow's milk is used, it should be obtained, if possible, from a dairy having no tuberculous cattle.

The living and sleeping rooms of the family should always be well ventilated. The human body, if it is to be in a healthy state, must have pure air. Bedrooms should not be overcrowded and single beds are advisable.

The above rules can be taken to heart by grown-up persons as well.

These simple rules are worth observing because a healthy body is usually able to overcome tuberculosis, but a weakened body is not.

How May Tuberculosis Be Cured?

Tuberculosis may be cured by the same measures which prevent it, namely, by making the body stronger, so that it will be able to kill the germs that have gotten into the tissues.

The pure air, good food, lots of rest treatment cures more people of tuberculosis than all the medicines that are known.

Avoid patent medicines for tuberculosis, particularly cough medicines, as these usually contain alcohol and opiates, which though they may make the patient feel better, usually allow the disease to grow worse.

The above methods should be carried out under the advice of a private or dispensary physician who has made a study of the disease.

"DEVELOP HEALTHY BODIES."



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George H. Kress, M.D., Editor.

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The aim of this publication is to promote the study and dissemination of knowledge concerning the prevention and cure of tuberculosis, to aid in the establishment of institutions intended for those purposes, and to co-operate with such organizations as can render aid in the solution of the tuberculosis problem.

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San Francisco Association for the Study and Prevention of Tuberculosis

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First Vice-Pres...Dr. Herbert C. Moffitt	tary, Treasurer, Mrs. Jno. F. Merrill,
Second Vice-Pres. Mrs. Jno. F. Merrill	Mrs. William H. Crocker, Dr. George
Secretary.....Dr. Wm. C. Voorsanger	H. Evans, Dr. Harry M. Sherman and
Treasurer.....The Crocker Nat'l Bank	Waiter MacArthur.

Los Angeles Society for the Study and Prevention of Tuberculosis

President.....Dr. George L. Cole	Treasurer.....Mrs. Berthold Baruch
First Vice-Pres...Edwin T. Earl	Executive Committee—President, Secre-
Second Vice-Pres. A. L. Stetson	tary, Treasurer, Joseph Scott, Philip
Secretary.....Dr. George H. Kress	Forve, Dr. W. Jarvis Barlow, W. Le
	Moyne Wills.

Redlands Society for the Study and Prevention of Tuberculosis

President, Dr. Hoell Tyler Vice-Pres. Dr. J. E. Payton Secretary, Dr. Gayle G. Mosely

San Diego Society for the Study and Prevention of Tuberculosis

President.....Dr. Fred Baker	Secretary.....H. A. Thompson
Vice-Pres.....Dr. J. A. Parks	Treasurer.....Dr. Thos. S. Whitlock

EDITORIAL.

This issue of the BULLETIN is able to chronicle a decided forward movement in the anti-tuberculosis activities of California. The year 1909 promises to be worthy of remembrance as a period during which the organization and institutions in the prevention of tuberculosis and the care of consumptives were able, through mutual help, to put in motion many desirable and long-delayed, but greatly needed, activities.

It may not be out of place at this time to briefly indicate the history of organized anti-tuberculous work in the Golden State.

The first organization to attempt, as a separate institution, to grapple with tuberculosis in California was that of the Barlow Sanatorium, of Los Angeles, which was incorporated on April 28, 1902, by Messrs. Poindexter, Francis and Hooper, and Doctors Bridge and Barlow. This institution completed its first buildings and received its first patient on September 1, 1903.

Next followed the temporary organization of the Southern California Anti-Tuberculosis League at Pasadena on December 3, 1902, under the leadership of Dr. F. M. Pottenger of Monrovia, the organization being made permanent at the first annual meeting held at the Y. W. C. A. Hall in Los Angeles, on June 2, 1903.

On January 31, 1907, at a meeting held in Los Angeles, the name of the Southern California Anti-Tuberculosis League was changed to The Southern California League for the Prevention of Tuberculosis.

At the meeting held at Pomona, Cal., on December 6, 1904, a committee to take steps for the formation of a state

organization was authorized, but the efforts at that time failed of fruition.

On the occasion of the annual meeting of the Southern California League, held at Riverside, Cal., on December 3, 1907, a call for that purpose having been sent to many persons interested in the subject in California, it was voted to broaden the scope of the League by merging it into a state organization to be called The California Association for the Study and Prevention of Tuberculosis.

A constitution and by-laws for such an organization were adopted at that time, and this constitution, as revised, is printed in the current issue of this BULLETIN.

In the past, the work of the Southern California Anti-Tuberculosis League may be said to have taken four forms, viz., literature, lectures and organization, helping station and dispensary, and legislation.

Through its efforts, the co-operation of the Boards of Supervisors of the southern counties was obtained and some eighty thousand pieces of literature on the prevention of tuberculosis were distributed in the schools of Southern California. Lectures were held and an impetus given to organization work by the establishment of local societies at Redlands and San Diego.

Acting with the Committee on Tuberculosis of the Medical Society of the State of California, legislation for an appropriation on tuberculosis for the State Board of Health, as well as a bill for a state sanatorium, were carried through the Legislature two years ago, but the latter bill was vetoed by the Governor.

The Los Angeles dispensary, or helping station for indigent consumptives, was authorized at a meeting of the Southern California Anti-Tuberculosis League held on January 25, 1906, and the Station received its first patient on August 6, 1906.

When the Southern California League was merged into the State Tuberculosis Association in 1907, it was felt that the Los Angeles Helping Station should be under the care of a separate, or city society. Owing to the fact that the State Association was at this time without funds to carry on its work, the organization of the Los Angeles Society was delayed until May 28, 1908, so that the work of the State Association should not lapse through lack of finances. The Los Angeles Society also voted to allow all the membership fees of Los Angeles residents to accrue to the benefit of the State Association up to January 1, 1909.

The California Association for the Study and Prevention of Tuberculosis is regularly affiliated with the national organization of the same name, and it hopes earnestly that in turn, the city and district societies will see the advantages of affiliating with the State Association. Only by a broad plan, can big results be obtained for California, in this anti-tuberculosis work. If the State Association is to make no attempt to secure memberships in cities having local societies, then if the work of the State Association is to continue, if literature is to be sent out everywhere, and if new centers of anti-tuberculosis warfare are established in every city in the State, it is absolutely necessary that such city units do their part in the support of the State Association.

The present constitution and by-laws of the Association are modeled after those of the National and other state organizations, and seem to be adapted for a fair and equitable basis of representation of all individuals and organ-

izations who may be interested in the warfare against the great white plague. Any faults in the by-laws can be easily remedied.

The Los Angeles Society donated to the Association all funds in its treasury on December 31st, and has affiliated with the State Association in the manner indicated in the by-laws. The Los Angeles Society will start the year with the proceeds from the sale of the Red Cross Christmas stamps.

In addition the Los Angeles Helping Station is able, through the interest of Dr. George Martyn and his friends, to place an additional visiting nurse in the field, and to keep open the helping station five days in the week, instead of three, as formerly.

The San Francisco Association opened its dispensary on January 17th, 1909, and starts the new year under splendid conditions. All signs give promise of a most useful career. The newspaper clippings giving an account of the work at San Francisco, and which are printed in this BULLETIN should be of interest to all as showing what can be done by a group of devoted workers. It was the intention to organize the San Francisco several years ago, when the great calamity overtook that city. The plans then formed had to be set aside for a time, but the delay seems to have placed the project on an even firmer basis.

At Sacramento, a society has also been formed, with Dr. Briggs, of the California State Board of Health, taking a prominent part in the movement.

Alameda also, so Dr. Page writes us, will soon come through with a society.

At Santa Barbara, as the result of the work of Dr. C. C. Browning, Dr. Rexwald Brown and others, a society has likewise been formed. An account thereof is printed on another page.

The San Diego Society, with the co-operation of the San Diego Subdivision of the American National Red Cross

gives every indication of increased activity.

At Pasadena, Long Beach, Santa Ana, and Riverside, evidence of increased interest in anti-tuberculosis work is manifest, and before the next BULLETIN appears, we hope to chronicle the establishment of organized efforts in those places.

All these things point to the inauguration of a new era in the work against the world's great scourge.

We would urge these different organizations to conform as far as possible with the plan mapped out by the National Association. By giving a fair pro rata of financial support to the State Association, it will be possible to print a good BULLETIN that can be sent at a minimum of cost, not only to members of the local societies, but to all persons whom it is desired to interest.

In the printing of general literature on prevention and cure, the State Association will be glad to supply reprints at virtually the cost of printing. This can mean a big saving to local societies.

The annual meeting of the Association will be held in San Jose (the week of the third Tuesday in April), probably on April 19th, just prior to the meeting of the Medical Society of the State of California.

With unity of purpose and mutual co-operation, that meeting should see the State Association established on such a fair and broad basis, and in such cordial and harmonious relationship to the city and district units, that none who have the highest interests of this much-needed work in California at heart, will be able to do other than lend their hearty support to its cause and efforts.

CONSTITUTION AND BY-LAWS OF THE STATE ASSOCIATION AND OF THE LOS ANGELES SOCIETY FOR THE STUDY AND PREVENTION OF TUBERCULOSIS.

As a matter of record and in order to make convenient reference thereto, as well as to serve as suggestive methods to societies still to be organized, the constitution and by-laws of the State Association and one of the city societies, that of Los Angeles, is printed in this issue of the BULLETIN. These rules are modeled after those of the National Association, and will be found, we believe, to answer well the purposes of local societies organized to battle against the great white plague.

CONSTITUTION.

Article I—Name.

The name of this organization shall be "THE CALIFORNIA ASSOCIATION FOR THE STUDY AND PREVENTION OF TUBERCULOSIS."

Article II—Purposes.

The objects of this Association shall be:

1. *The study and dissemination of knowledge concerning the causes, treatment and prevention of tuberculosis.*
2. *The promotion of the organization and work of this Association in all parts of the State.*
3. *The securing of proper legislation for the relief of the tuberculous sick and for the prevention of tuberculosis.*
4. *The encouragement of adequate provision for consumptives by the establishment of sanatoria, hospitals, dispensaries and otherwise.*
5. *The co-operation with the National Association for the Study and Prevention of Tuberculosis; with the public authorities, such as State and local Boards of Health; with medical societies; and with civic and other organizations, in inaugurating, promoting and developing approved measures which aim at the prevention and cure of the disease.*

6. *And in general*, to do all things and acts, having as their object the relief of those afflicted with tuberculosis and the control and prevention of this disease in our State and elsewhere.

Article III—Meetings.

The *meetings* shall be held at such times and places as may be directed in the By-Laws.

Article IV—Amendments.

Amendments may be made by a two-thirds vote of the members present at an annual or special meeting, provided that the proposed amendment shall have the approval of the Board of Directors before becoming operative.

BY-LAWS.

Article I—Members.

The members of this Association shall be divided into *seven classes*, viz. 1—annual members (the unit of membership); 2—affiliated members; 3—subscribing members; 4—patron members; 5—life members; 6—honorary members; 7—advisory members.

1. *Annual members* are those persons who pay annually to the Association the annual dues of one dollar.

2. *Affiliate members* are those persons who have paid to local societies the annual dues of such local societies; provided that the sum of twenty-five cents from each of such person's local dues shall be remitted to this Association by the respective local society, for the said person's affiliate membership in this Association.

3. *Subscribing members* are those persons who in any one year pay to this Association not less than five dollars.

4. *Patron members* are those persons who in any one year pay to this Association the sum of not less than twenty-five dollars.

5. *Life members* are those persons who in any one year pay to this Asso-

ciation the sum of one hundred dollars or more.

6. *Honorary members* are those persons who for notable services in the campaign against tuberculosis shall be voted as worthy of such honor.

7. *Advisory members* shall be those persons in the legislative, executive and judicial departments of our State, counties or cities, or in the clerical, medical, legal, or journalistic professions, or in civic organizations or civil life who shall be voted into such membership by the Executive Committee.

Article II—Relation to Local Societies.

Any local society organized for the same general objects as indicated in the constitution of this Association shall be eligible for affiliation as a local subdivision of this Association, provided, however,

That when such a local subdivision, or society, desires to be known as being affiliated with the *California Association for the Study and Prevention of Tuberculosis*, it shall pay to the State Association, the sum of at least twenty-five cents from the local dues of every member, all such members receiving in return for such financial aid, the privilege of affiliate membership in the State Association, and the "Bulletin" of the State Association; with the right to use the double red cross of the Association, and shall be granted also the right of suffrage, through delegates, in the proportion as indicated in Section 3 of Article III of these By-Laws.

It is desirable that each local organization, for the sake of uniformity and harmonious effort, have as its name "The.....Society for the Study and Prevention of Tuberculosis," and to adopt as its Constitution and By-Laws, a form modeled after those of the State Association.

Each local subdivision, or society, is also requested to place the Literature and Publications Committee of this Association on the Advisory Council of

its own Literature and Publications Committee, and further to consult, if possible, the members of the said State Committee on any new literature of a general nature to be issued by such local society.

Article III—Suffrage.

1. Any person who pays the annual dues of one dollar shall be given the *unit of suffrage*, i. e., shall have the right to one vote. *The units of suffrage shall be divided among the members as follows:*

1. *Annual, subscribing, patron and life members* shall have one vote each.

2. Each affiliated society shall be permitted to have one vote for every fifty or major fraction thereof, of its members whose pro rata of local dues shall have been paid to the State Association by such society, as provided for in Article II; provided that every affiliated society of less than fifty members shall have at least one vote.

3. Each affiliated society may be represented by one or more delegates from its membership, provided such delegates present credentials signed by the President or Secretary of each local society.

4. The accredited delegate or delegates from each affiliated society shall have the privilege of casting the entire vote to which such local society may be entitled according to Section 2 of this Article.

Article IV—Meetings.

1. *The annual meeting* of this Association shall be held during the month of April, the exact time and place to be set by the President or Executive Committee. At this meeting shall be held the annual election of officers.

The order of business at this meeting shall be reading of the minutes, reports of officers and of the Executive Committee and other committees, election of officers, old business, new business, adjournment.

2. *Special meetings* may be called by the Executive Committee, and shall be called upon the written requests of at least twenty members of the Association.

Article V—Officers and Committees.

The officers to be elected at this annual meeting shall be: a *President*; a *1st. Vice-President*; a *2nd Vice-President*; a *Secretary*; a *Treasurer* and *twenty-five Directors*.

The president of every affiliated society shall be ex-officio Vice-President of the State Association.

The Board of Directors shall consist of the above named thirty elected officers and directors plus ten additional directors to be elected by previously elected directors, thus making the board of directors when completed, a board of forty members. Ten members shall be necessary to constitute a *quorum* of the Board of Directors.

It shall be the *duty of the Board of Directors* to forward the work of the Association between meetings of the Association except in so far as it may delegate general and special work to the Executive and other committees.

The Board of Directors shall have the power, if it be deemed desirable, to elect such *honorary vice-presidents*, as in its judgment seemed best.

The Executive Committee shall consist of the President, the Secretary, the Treasurer, and the Chairman of each standing committee.

The President of the Association shall be the *Chairman of the Executive Committee*. Six members of the Executive Committee shall constitute a *quorum*. *To this Executive Committee shall be entrusted* all the executive work of the Association in the intervals between meetings of the Association and the Board of Directors. The Executive Committee shall have the power to fill all *vacancies* in the Officers or Board of Directors.

The following *Standing Committees** shall be appointed by the President, his nominations being ratified by the Board of Directors.

Each Committee shall consist of five members selected from the Board of Directors, one of whom shall be designated as *Chairman* by the President.

Each Committee shall have the power to appoint such additional "advisory members" as it may deem wise for the purpose of better carrying on its work. The President and Secretary of the Society shall be ex-officio advisory members of all standing committees.

Each Committee shall elect its own *Secretary*, the said Secretary to keep the *minutes of the Committee* in a book provided for this purpose by the Association.

The standing committees,* with their duties, shall be:—

1. *Finance Committee*: To devise ways and means of securing the funds to carry on the Association work.

2. *Membership Committee*: To secure new members for the Society.

3. *Press and Publicity Committee*: To prepare and secure publication in the lay and other papers of California of articles designed to educate the public as to the dangers of tuberculosis and aims and objects of the Society.

4. *Legislative and Law Enforcement Committee*: To secure the passage of needed legislation and the enforcement of existing laws designed to stamp out tuberculosis.

5. *Literature and Publications Committee*: To have supervision of the editing and publication of a paper and other publications and literature to inform the public as to the dangers of the disease and the aims and objects of the Society.

The chairmen of the Literature and Publications Committees of local subdi-

visions or societies shall be ex-officio advisory members of this Committee.

6. *Hospital and Dispensary Committee*: To secure and co-ordinate efforts among sanatoria, hospitals, dispensaries, helping stations, day camps and other institutions aiming to provide treatment and relief to persons afflicted with tuberculosis and to have general supervision of any such institutions of this Association, if no special committees for such purpose be appointed.

7. *Consulting Medical Committee*: To be an advisory committee on the medical phases of hospital, dispensary and other such activities, which may be inaugurated or carried on in the State, and to seek to secure uniformity and the highest efficiency of method in the attainment of the medical objects of the Association and its affiliated societies.

8. *Lectures and Public Meetings Committee*: To arrange and have charge of lectures and public meetings, to inform the public as to the dangers of tuberculosis and the aims and objects of the Society.

The duties of the aforesaid officers and committees shall be those pertaining to their respective positions, *provided that the Treasurer* shall pay out no funds except on warrant signed by a person duly authorized by the Board of Directors.

The Board of Directors shall not incur any indebtedness or liability for the Society, in excess of the amounts of funds in the hands of the Treasurer.

The aforesaid officers and committees shall *hold office for one year* or until their successors are elected or appointed.

Article VI—Advisory Council.

The Advisory Council of the Los Angeles Society shall be composed of persons as follows, who shall have been

*If it be deemed desirable to concentrate the work of the standing committees into the hands of fewer persons, this can be accomplished by appointing the same three persons on two or more closely related committees.

elected by the Board of Directors of Executive Committee:

First. The officers and directors of this Association.

Second. Officers or representatives of local affiliated or medical societies, the number from any one society, not to exceed three.

Third. A representative from the medical staff of every local tuberculosis institution (hospital, dispensary, sanatorium, day camp, etc.) and from the medical staff of every county or city or charitable hospital.

Fourth. A representative from the board of trustees or other executive authorities of any of the institutions mentioned in the preceding paragraph.

Fifth. A representative from approved charitable, fraternal or civic organizations or institutions.

Sixth. A representative from such of the Health Boards of State, Counties, Cities or Towns of California as may be deemed desirable.

Seventh. The Health Officers of the State and of such Counties, Cities and Towns of California as may be deemed desirable.

The *Advisory Council* shall meet at such times and places as may be deemed desirable by the President or Board of Directors. The Council shall select its *own Chairman*, but the President of the Association shall be honorary chairman of the Council.

The *duty* of the *Advisory Council* shall be the promotion of the work of the Society as far as possible.

Article VII—Amendments.

Amendments of the By-laws shall require a two-thirds vote of the members present at an annual or special meeting of the Society or Board of Directors; provided that in either instance, the proposed amendment shall have received the approval of at least ten members of the Board of Directors, before becoming operative.

CONSTITUTION AND BY-LAWS OF THE LOS ANGELES SOCIETY FOR THE STUDY AND PREVEN- TION OF TUBER- CULOSIS.

CONSTITUTION.

Article I—Name.

The name of this Society shall be "THE LOS ANGELES SOCIETY FOR THE STUDY AND PREVENTION OF TUBERCULOSIS."

Article II—Purposes.

The purposes of this Society shall be:

1. *The study and dissemination of knowledge* concerning the causes, treatment and prevention of tuberculosis, particularly as it should be of interest to the citizens of Los Angeles and vicinity.

2. *The promotion of the organization* and work of this Society in all parts of the city and county of Los Angeles.

3. *The securing of the proper legislation* for the relief and prevention of tuberculosis.

4. *The encouragement of adequate provision for consumptives* by the establishment of sanitary hospitals, dispensaries and otherwise.

5. *The co-operation with the National and California Associations for the Study and Prevention of Tuberculosis*; with the public authorities, such as State and local Boards of Health; with medical societies; and with civic and other organizations, in inaugurating, promoting and developing approved measures which aim at the prevention and cure of the disease.

6. *And in general*, to do all things and acts, having as their object the relief of those afflicted with tuberculosis and the control and prevention of this disease in our city and county and elsewhere.

Article III—Meetings.

The *meetings* shall be held at such times and places as may be directed by the By-laws.

Article IV—Amendments.

Amendments shall need a two-thirds vote of those present at an annual or special meeting, provided that written notice of such proposed amendment shall have been given to the Board of Directors at least thirty days prior to such meeting.

BY-LAWS.

Article I—Members.

The members of this Society shall be divided into *six classes*, viz.: 1—annual members (the unit of membership); 2—subscribing members; 3—patron members; 4—life members; 5—honorary members; 6—advisory members.

1. *Annual members* are those persons who pay annually to the Society the annual dues of one dollar.

2. *Subscribing members* are those persons who in any one year pay to this Society not less than five dollars.

3. *Patron members* are those persons who in any one year pay to this Society the sum of not less than twenty-five dollars.

4. *Life members* are those persons who in any one year pay to this Society the sum of one hundred dollars or more.

5. *Honorary members* are those persons who for notable services in the campaign against tuberculosis shall be voted as worthy of such honor.

6. *Advisory members* shall be those persons in the legislative, executive and judicial departments of our State, counties or cities, or in the clerical, medical, legal, or journalistic professions, or in civic organizations or civil life who shall be voted into such membership by the Executive Committee.

Article II—Relation to National and State Associations.

The members of this Society shall be urged to *strive for the fullest possible affiliation* with the National and California Association for the Study and

Prevention of Tuberculosis, and in regard to the California Association this Society shall pay to the State Association twenty-five cents of the annual dues of all its local members, in return for which the State Association shall authorize this Society to be known as an affiliated subdivision and shall send to the members whose pro rata of dues are so paid, the "Bulletin" of the State Association and any other literature that may be issued for such purpose. This Society shall also be entitled to such vote and delegates in the State Association as provided for in the constitution and by-laws of that Association.

Article III—Suffrage.

1. *All annual, subscribing, patron and life members* shall have one vote each.

Article IV—Meetings.

1. *The annual meeting* of this Society shall be held during the month of January, time and place to be set by the Executive Committee. At this meeting shall be held the annual election of officers.

The order of business at this meeting shall be reading of the minutes, reports of officers and of the Executive Committee and other committees, election of officers, old business, new business, adjournment.

2. *Special meetings* may be called upon the written requests of at least ten members of the Society.

Article V—Officers and Committees.

The officers to be elected at this annual meeting shall be: a *President*; a *1st Vice-President*; a *2nd Vice-President*; a *3rd Vice-President*; a *Secretary*; a *Treasurer* and *ten Directors*.

The Board of Directors shall consist of the above named sixteen elected officers and directors, plus nine additional directors to be elected at the option of the aforesaid previously elected directors, thus making the board of directors when completed, a board of twenty-five members. Seven members shall be nec-

essary to constitute a *quorum* of the Board of Directors.

It shall be the *duty of the Board of Directors* to forward the work of the Society between meetings of the Society except in so far as it may delegate general and special work to the Executive and other committees.

The Board of Directors shall have the power, if it be deemed desirable, to elect such *honorary vice-presidents* as in its judgment seems best.

The *Executive Committee* shall consist of the President, the Secretary, the Treasurer, and the Chairman of each standing committee.

The President of the Society shall be the *Chairman of the Executive Committee*. Five members of the Executive Committee shall constitute a *quorum*. *To this Executive Committee shall be entrusted* all the executive work of the Society in the intervals between meetings of the Society and the Board of Directors. The Executive Committee shall have the power to fill all *vacancies* in the Officers or Board of Directors.

The following *Standing Committees** shall be appointed by the President, his nominations being ratified by the Board of Directors or Executive Committee.

Each Committee shall consist of three members selected from the Board of Directors, one of whom shall have been designated as *Chairman* by the President.

Each Committee shall have the power to appoint such additional "advisory members" as it may deem wise for the purpose of better carrying on its work. The President and Secretary of the Society shall be ex-officio advisory members of all standing committees.

Each Committee shall elect its own *Secretary*, the said Secretary to keep the *minutes of the Committee* in a book provided for this purpose by the Society.

The standing committees, with their duties, shall be:—

1. *Finance Committee*: To devise ways and means of securing the funds to carry on the Society work.

2. *Membership Committee*: To secure new members for the Society.

3. *Press and Publicity Committee*: To prepare and secure publication in the lay and other papers of California of articles designed to educate the public as to the dangers of tuberculosis and aims and objects of the Society.

4. *Legislative and Law Enforcement Committee*: To secure the passage of needed legislation and the enforcement of existing laws designed to stamp out tuberculosis.

5. *Literature and Publications Committee*: To have supervision of the editing and publication of a paper and other publications and literature to inform the public as to the dangers of the disease and the aims and objects of the Society.

6. *Hospital and Dispensary Committee*: To secure and co-ordinate efforts among sanatoria, hospitals, dispensaries, day camps and other institutions aiming to provide treatment and relief to persons afflicted with tuberculosis and to have general supervision of any such institutions of this Society, if no special committee for such purpose be appointed.

7. *Consulting Medical Committee*: To be an advisory committee on the medical phases of hospital, dispensary and other such activities.

8. *Lectures and Public Meetings Committee*: To arrange and have charge of lectures and public meetings, to inform the public as to the dangers of tuberculosis and the aims and objects of the Society.

The duties of the aforesaid officers and committees shall be those pertaining to their respective positions, *provided that the Treasurer* shall pay out no funds except on warrant signed by the

*If it be deemed desirable to concentrate the work of the standing committees into the hands of fewer persons, this can be accomplished by appointing the same three persons on two or more closely related committees.

Secretary, or other person authorized by the Board of Directors.

The Board of Directors shall not incur any indebtedness or liability for the Society, in excess of the amounts of funds in the hands of the Treasurer.

The aforesaid officers and committees shall *hold office for one year* or until their successors are elected.

Article VI—Advisory Council.

The Advisory Council of the Los Angeles Society shall be composed of persons as follows, who shall have been elected by the Board of Directors of Executive Committee:

First. The officers and directors of the Society.

Second. Officers or representatives of local medical societies, the number from any one society not to exceed three.

Third. A representative from the medical staff of every local tuberculosis institution (hospital, dispensary, sanatorium, day camp, etc.) and from the medical staff of every county or city or charitable hospital.

Fourth. A representative from the board of trustees or other executive authorities of any of the institutions mentioned in the preceding paragraph.

Fifth. A representative from approved charitable, fraternal or civic organizations or institutions.

Sixth. A representative from such of the Health Boards of State, Counties, Cities or Towns of California as may be deemed desirable.

Seventh. The Health Officers of the State and of such Counties, Cities and Towns of California as may be deemed desirable.

The *Advisory Council* shall meet at the time of the annual meeting of the Society, and at such other times and places as may be deemed desirable by the President or Board of Directors. The Council shall select *its own Chairman*, but the President of the Society shall be honorary chairman of the Council.

The *duty* of the Advisory Council shall be the promotion of the work of the Society as far as possible.

Article VII—Amendments.

Amendments of the By-laws shall require a two-thirds vote of the members present at an annual or special meeting of the Board of Directors; provided that such amendment must be approved by the Society at its next meeting.

SAN FRANCISCO DISPENSARY IS OPENED.

The following excerpts from the daily press of San Francisco give an idea of how well the plans of the founders of the San Francisco Association have been realized. In their reading will be found inspiration to all, for continued effort in the great fight against tuberculosis:

Tuberculosis Sufferers May Be Treated at New Clinic Tomorrow.

The San Francisco Association for the Study and Prevention of Tuberculosis announces the opening of its *free clinic* tomorrow morning, January 18th. This will be located at 1734 *Stockton street*, near Filbert, at the

rooms of the Telegraph Hill Neighborhood Association, and will remain there until the permanent dispensary is built on Jackson street.

For the present the clinic will be open for three days a week, from 8:30 to 10 o'clock on the mornings of Monday, Thursday and Saturday.

The nurses in connection with the clinic are to perform a double work, not confining themselves to the ordinary routine demand of nurses, but who will also fulfill the function of social workers and go into the homes of patients. By this every sanitary regulation will be complied with in the homes, which will not only protect the patients but

the family and the community from danger of infection. The nurses will additionally work in close co-operation with the Board of Health by reporting unsanitary surroundings, tuberculosis cases and removals of patients, that premises may be disinfected.

Dr. G. H. Evans, chairman of the Hospital and Dispensaries Committee, says: "The object of our work is to teach families to see the sanitary conditions of their homes and of people, and that all members of a family may know what germs are present."

The clinicians to be immediately in charge are Dr. W. R. P. Clarke, Dr. W. C. Voorsanger and Dr. James L. Whitney, with Miss Lucy B. Fisher and Mrs. Jones as nurses.

ASSOCIATION HAS ANNUAL ELECTION.

Calls for People of the City to Unite in Suppression of Tuberculosis.

SAN FRANCISCO, Jan. 15, 1909.

The San Francisco Association for the Study and Prevention of Tuberculosis held its *first annual meeting* in the rooms of the California Club, 1750 Clay street, last night at 8 o'clock. Directors of the association for office during the year were elected, and a lecture on "*The Menace of Tuberculosis Toward Infants and the Child*" was delivered by Dr. Langly Porter.

Dr. Porter laid particular stress on the need for concerted action on the part of the people of San Francisco. He said that tuberculosis last year was the cause of the deaths of 160,000 persons, and if the people of the State would stop to consider that one individual who was infected with the tuberculosis germ was the means of spreading the disease to on an average ten other persons, that they would demand a revolution in legislative laws that would force people to take ordinary precautions for the isolation and prevention of cases of tuberculosis. He

quoted instances of pure carelessness of parents and people, who, had they realized the danger of the disease that they were exposing their children to would have taken greater precaution. He asked that people should be told of the danger of the disease, where and how it had its origin, and then the treatment necessary for its cure.

Dr. William C. Voorsanger, the secretary of the association, read his report, which outlined the work that had been accomplished and set forth vividly the work that was still to be accomplished, and he asked that the people of this city would join in an effort that is world wide to stamp out so dreaded a disease. He showed that the association would start the new year with a good capital, but he said that there was no better or more deserving charity than an organization whose object was the protecting of human life.

President Thomas E. Hayden, in a short address, declared that if children were allowed more freedom in the fresh air for the first eight years of their lives, and not forced to attend school for so many hours a day that their health would be better and that their powers of attaining an education after that time would be doubly increased.

The following directors were elected: Thomas E. Hayden, A. W. Scott, Jr., Charles C. Moore, Mrs. J. F. Merrill, Mrs. S. S. Palmer, Miss Catherine Felton, Dr. George H. Evans, Dr. Herbert C. Moffitt, Dr. William C. Voorsanger, Charles M. Cooper, Dr. Harry M. Sherman, Dr. Rene Bine, Mrs. S. W. Dennis, Mrs. M. C. Sloss, Walter MacArthur, Osgood Putman, Gustav Brenner, J. J. Bakewell, Mrs. W. H. Chocker, Mrs. Henry Payot, Henry U. Brandenstein, Miss Laura McKinstry, Dr. W. Watt Kerr, Dr. Walter Coffey, Dr. William Fitch Cheney, W. J. French, Dr. Charles G. Levison, J. J. Fagen, J. B. Grimwood, Mrs. Harriet Carlson.

DISPENSARY READY ON JANU- ARY 18TH.

**Patients May be Treated for Tubercu-
losis Free of Charge.**

HAVE PERMANENT GROUND.

**Annual Meeting of Tuberculosis So-
ciety Next Thursday Night.**

At the first annual meeting of the San Francisco Association for the Study and Prevention of Tuberculosis next Thursday evening, January 14th, the activity of its plans will be shown. The society has only been in existence a few months, but its membership numbers nearly 1000, and now it is to begin the active fight against the great white plague.

Its endeavors will begin to be realized on January 18th, when a dispensary will be opened at the Telegraph Hill Neighborhood Association, through the kindness of Miss Elizabeth Ashe.

Patients will be treated for tuberculosis in its varying forms under the diagnosis of clinicians and trained nurses, and in a short time the association will be permanently located in its own quarters.

Ground has been obtained for three years at a nominal lease on Jackson street, between Polk and Van Ness avenue, and a building will be erected where the treatment of tuberculosis may proceed in conformity with all the laws of medical science and skill. The building will contain seven rooms, and will house a dispensary and rooms for the executive officers.

The annual meeting will be one of unusual interest, and will engage the attention of the city's educators, while many teachers will be present. The subject will be exploited by the officers of the society, and Dr. Langley Porter will speak specifically upon "The Menace of Tuberculosis for Infant and Child."

General education is to be a prominent feature of the association's enterprise, and patients will be taught much in regard to their own safe keeping, even while undergoing treatment.

The clinicians in charge of the dispensary, both during its temporary and permanent location, are Dr. Clarke of the University Hospital, Dr. Whitney of the Lane College, and Dr. W. C. Voorsanger of Mount Zion Hospital. Miss Lucy B. Fisher will be head nurse, and has just returned from New York, where her observations have given her the finest equipment for the work among tubercular patients. She will also have able assistants.

On Thursday evening a resume of the association's work will be given, with reports by Thomas Hayden, President; Dr. Voorsanger, Secretary, and a representative of the Crocker National Bank as Treasurer.

The Hospital and Dispensary Committee are under the chairmanship of Dr. G. H. Evans; Publicity and Education, Dr. Harry M. Sherman; Membership Committee, Mrs. J. F. Merrill; Mrs. William H. Crocker, chairman Finance Committee, and Legislative Committee, Walter MacArthur.

THE SANTA BARBARA SOCIETY FOR THE PREVENTION OF TUBERCULOSIS ORGANIZED.

The Santa Barbara County Medical Society has adopted the commendable plan of calling from time to time special sessions of the Society to which it extends invitation to the general public and discusses subjects in which they may be interested.

Dr. Charles C. Browning, Second Vice-President of the California Association for the Study and Prevention of Tuberculosis, was invited to address one of these meetings, which was held the evening of January 6th, at the

assembly room of the high school, on the subject of "Tuberculosis."

The following comments from the Santa Barbara papers tell of the interest manifested:

"Practical and of the heart-to-heart variety was the lecture given by Dr. C. C. Browning of Monrovia last night at the assembly room of the high school, to a large audience upon the topic 'Tuberculosis.' Dr. Browning's address, illustrated by stereopticon slides, was calculated to be of help to the public in keeping healthy if it could, and being able to fight the disease if it must. The address was under the auspices of the California Association for the Study and Prevention of Tuberculosis, of which Dr. Browning is chairman of the Committee of Publicity.

"The net result of the lecture was the formation of a branch association, and the following committee was appointed to arrange the details for permanent organization, and to draw a set of by-laws: Dr. Flint, Dr. Stoddard, Dr. Brown, Professor Adrian and Miss Marie V. Lehner, the county superintendent of schools.

"The address brought home to the people the exceedingly important factors and phases of this dreaded disease. It told of the manner of development of tuberculosis, and how it could be combatted. Much depended upon the physical condition of the person and the environment of the individual. The fact was impressed strongly that there should be less fear on the part of the public, of tuberculosis, in the treatment of patients. With proper precautions observed, the speaker declared, there was no danger of infection from such a one. It was not in the province nor power of physicians to stamp out the disease without the intelligent co-operation of the people; all the physicians could do would be to suggest; it was for the people to carry out these sug-

gestions fully. The rules governing the keeping of one's body healthy are plain and simple, and it is up to the people to carry on the good work."

Dr. Browning said in part: "The first idea I wish to impress upon you is that infectious disease is not necessary; that it is not an unavoidable visitation of God, but depends wholly on physical conditions which can be brought under our control.

"The laws of nature are never broken in the course of disease any more than in any other natural process. And just in so far as we know the life history of the organism, or bacteria, which cause an infectious disease like tuberculosis, just so far can we prevent that disease.

"About 150,000 persons die in the United States every year of tuberculosis. One American in every ten dies from this disease in some one of its many forms. And between the ages of eighteen and forty years about one-third of all the deaths are due to this cause. Hence there is no more urgent necessity than to stop the terrible ravages of this great white plague.

"For years the medical world has known that tuberculosis is essentially a communicable, curable, and preventable disease, and has been preaching this truth to the people. As a result, the death-rate has greatly diminished in every civilized country (and especially so where organized effort has been undertaken), but physicians can only direct the work against tuberculosis. The people must help themselves, and success depends on them.

"The board of health of a city, for example, may obtain a municipal ordinance against spitting in the street-cars, on sidewalks, or in public buildings, and they may post signs in the cars and elsewhere, but if public sentiment and intelligence does not support and help to enforce the law, it will not

succed in stopping this dangerous nuisance."

Dr. Browning showed a large series of stereopticon views to explain the nature of the tubercle bacillus or germ, and the way it destroys the lung tissue. He also showed pictures of the social conditions which most favor its growth, the dark, sunless, and airless rooms of the tenements and sweat-shops.

Dr. Browning also spoke of the importance of a pure milk supply and of certified milk in preventing tuberculo-

sis, as well as typhoid and diphtheria and infantile diarrheal diseases.

We believe that a wide-awake organization will be perfected in Santa Barbara, and that it will accomplish a good work in that city.

We hope to see organization not only in every county seat, but in every city and community throughout the State. This is especially desirable in the southern portion of the State, where the people are more greatly interested than elsewhere.

THE SIXTH INTERNATIONAL CONGRESS OF TUBERCULOSIS.*

BY C. E. YOUNT, M.D., PRESCOTT, DELEGATE FROM ARIZONA.

Armies may come and go, nations may rise and fall, but for generations to come the international army engaged in its struggle against tuberculosis will have innumerable battles to fight. As is the case in no other war, we have now a mighty international army, its legions on every continent. Even the isles of the sea send their cohorts.

Tuberculosis is a very ancient enemy of mankind. To prove my statement, may I quote from history men whose names are familiar to every high school boy? In the fifth century B. C., Hippocrates announced that "Phthisis (consumption) taken early can be cured." Aristotle, a century later, notes that "The Greeks believed it to be contagious." (If the Greeks could have coupled this belief with a twentieth century organization against tuberculosis, this day and generation would not be engaged in its present struggle.) Celsus, in the first century B. C., recommends "Change of climate, and especially life at sea." (This statement is something of a surprise to our profession as we have come to think that the "change of climate" idea originated with this generation.) Galen, eighteen hun-

dred years ago, looking forward through the centuries beheld his ideal in the *Arizona* of today, when he advised "A dry hill climate."

If then, tuberculosis be proven to have been an ancient scourge of mankind, why this sudden, or I might say, nineteenth and twentieth century attack of the "allied forces" upon it? The ancients were warned against its probable contagiousness. France, in the early days, by proper isolation of cases in pavilions or hospitals, well nigh rid herself of tuberculosis, but, as is often the case, reposing in a state of overconfidence, she began to be remiss in caring for her tubercular, and today is as sorely decimated as the rest of the world. "Wars, smallpox, yellow fever, plague, railroad accidents, disasters; these cause momentary outbursts of great excitement and fear, even heavy mortality, but this mortality is small as compared to this silent, ever present foe, tuberculosis, which so stealthily and yet so unceasingly lies in wait for its victims." (J. H. Bulletin.)

A friend, a relative, the victim of tuberculosis; a death here and there from the same cause, made little im-

*Read, by invitation, before the pupils of the Prescott Schools, November 30, 1903.

pression upon the public mind. It is to the *value of the collection and publication of vital statistics*, that we owe this awakening of the nations of the world to their peril from the "Great White Plague." Let me illustrate. It is forty-seven years since the War of the Rebellion began, yet there are few present in this hall tonight who have not known directly, or indirectly, of the sorrow of these four years of war. We are apt to look upon those deaths as appalling in number, an unnecessary sacrifice of human life. During the entire four years' struggle the whole number of deaths from all causes, and on both sides, was about 500,000; a mighty human sacrifice to "Cause and Country," a sacrifice which left as its immediate legacy widows and orphans, with little or no provision for future needs; sorrowing parents, brothers and sisters, and an economic burden which this country has not yet discharged, nor can discharge! Let me tell you, friends, that the mortality of that great national calamity becomes insignificant when compared with the workings of "The Silent Reaper," during the last four years, through his field marshal, tuberculosis.

Six hundred and twelve thousand, the estimated deaths from tuberculosis in the United States during the four years just past; as against five hundred and five thousand estimated deaths on both sides during our four years of civil strife. If then, during each four years of our national life we lose one hundred thousand more lives than were lost during the trying period of the Civil War, is it not time that we pause in our mad rush of "progress," and study our vital statistics, and having discovered the shocking death rate from tuberculosis, seek the remedy? One hundred and fifty-three thousand lives in this country annually sacrificed before the Juggernaut, tuberculosis! What is true of our country is true in a measure of

the nations of the earth. I repeat, the *collection of vital statistics, their publication*, and finally a *discriminating study of the causes of death* among mankind, has *fixed the attention* of the world upon tuberculosis, and being a preventable disease, the cause of unnecessary sacrifice of life, happiness, and money, the nations have united as a mighty host to conquer this destroyer.

The International Congress on Tuberculosis, which meets tri-ennially, then is but the Council of War of the great leaders in this crusade. "Each Congress marks, as it were, a stage of progress in the work. We have the period in which Brehmer, Detweiler and others demonstrated the efficiency of the open air treatment of early tuberculosis in specially constructed sanatoria. Then the period (1882) following Koch's discovery of the specific cause of tuberculosis. At another Congress Koch advocated tuberculin as a curative agent, and in the period following, the substance was the all-absorbing subject of investigation and discussion. In 1901 Koch made the assertion that the tuberculosis of cattle was to be considered of little or no importance as a factor in the production of the disease in the human race. In the period since, this question has largely occupied the minds of investigators. In all these periods progress has been making in many correlative branches, and at the various congresses there has been a form of "rounding up" and taking of stock, so to say, of our knowledge as to the whole range of subjects embraced in the study of the disease, in its physical and bacterial nature, its source, and means of transmission, prevention and cure" (J. H. Bulletin).

I have kept you waiting some time for the real theme of this discourse, which is the Sixth International Congress on Tuberculosis held in Washington, D. C., September 21st to October 12th, 1908. This congress was held un-

der the auspices of the National Association for the study and prevention of tuberculosis with the United States government acting as host, President Roosevelt being the honorary president of the congress, with practically all the governors of the States as vice-presidents. The United States Senate and House of Representatives passed a resolution inviting the nations of the world to participate, then appropriated \$25,000 for exhibits from the hospitals and sanatoria under the Army, Navy and Marine Hospital service, and later \$40,000 for the temporary completion of the unfinished National Museum, in which to house this great gathering and the exhibit. To this congress nearly every nation sent its representatives. Far away China and Japan, Chili and Argentine Republic, all the great nations of Continental Europe, were there to give and receive instruction.

This congress may be best studied in its two divisions: First, the exhibit or great didactic method of instruction, whereby the school-boy or college graduate could quickly grasp the most abstruse truth from chart, model or photograph. Second, the meetings of the sections, seven in number, like the "seven ages of man" covering the field of tuberculosis from the cradle to the grave, in the discussion of some four hundred papers presented by the master minds of the world who are devoting their energies to the conquest of tuberculosis.

Among the many beautiful public buildings in our nation's capital none seemed more suitable to the needs of this congress than the majestic marble structure in course of building, known as the New National Museum. Its spotless walls of white rise as a huge monument, a triumphal arch, so to speak, through which this conquering army of scientists marched, whose very corridors rang with their notes of optimism!

The tuberculosis exhibit was formally opened, Monday night, September 21st,

Commissioner Henry B. Macfarland, representing the District of Columbia, presiding. "When he welcomed the delegates and visitors to the congress he called together one of the most notable groups of scientists in the world. For three weeks the public of Washington and the little army of visitors who were here for the congress were to be given the benefit of years of study and research. They were to see as clearly what had been done in the innermost sections of foreign countries as right there in Washington, and a visit to the exhibits was to get first hand knowledge of every known preventive, and every known remedy which has been disclosed to the world." (*Wash. Herald.*)

I desire to quote from a few of the addresses made on that memorable evening, before an audience of over 4,000 persons who crowded to the very walls all the available space in the large auditorium. With the U. S. Marine Band to intersperse the addresses we were doubly enthused, and were resolved for greater things, as an army on the battlefield is cheered by martial music. In his address of welcome Commissioner Macfarland said among other things, "We rejoice with you in every triumph over the common enemy which you have to report, and in every weapon which has helped to victory. We especially value the demonstrations of what fresh air and sunlight have done in fighting the great white plague. . . . We are thankful for the noble men and women who have given their time and money in this great cause."

The United States government had as its representative at the opening of the congress, Secretary of Agriculture James S. Wilson, a veteran in his service to country and a tower of strength to this nation through his efforts to secure for us foods untainted by disease or chemical preservation. Would that his high standards for inspection and inspectors might receive always the hearty support of the public.

Gen. George M. Sternberg, late surgeon-general of the U. S. Army, was the principal speaker of the evening. He said: "Since the discovery of the bacillus it has become apparent that tuberculosis is a preventable disease and it is easy to point out the means of prevention. To secure the enforcement of the measures necessary to accomplish this result is, however, by no means an easy task. It will require the united efforts of sanitarians, physicians, social workers, church organizations, fraternal organizations, teachers and the educated classes generally.

"It has also been demonstrated that in its earlier stages tuberculosis is curable in a large proportion of cases. It would seem that no humane person who has become convinced that these statements are true can hesitate to join the world-wide movement for the extinction of this deadly enemy of the human race.

"The apathy of the past was founded upon ignorance, the vigorous campaigning which has been inaugurated during recent years for the cure and prevention of tuberculosis is based upon exact knowledge, and will no doubt result in a rapid decrease in the mortality from this disease, and eventually, we hope, in its practical extinction. This hope is justified by results which have already been attained in this country and Europe." Note the optimistic ring of these words from a great scientist, who, like Koch, is himself the discoverer of a germ.

A number of other notable leaders spoke at this opening session; all with one accord pointed to the great value of such congresses in stimulating the anti-tuberculosis movement. Dr. Harris, health officer of Pennsylvania, presented the startling fact that his commonwealth had appropriated \$2,500,000 to start the crusade against tuberculosis in the Keystone state.

With the literary program concluded, the exhibit was formally declared open

to the delegates and the visiting public; no one was denied. For two hours longer, while the Marine band filled the corridors with classical music, four thousand people viewed, for the first time, this vast exhibit which it is needless to state far surpassed anything hitherto attempted in this direction. I will not attempt to describe it; that is quite beyond the power of my pen. I will not attempt to enumerate the exhibits, for I hold in my hand a booklet of 298 pages which scarcely more than outlines the 5,000 units displayed. Suffice it to state that the exhibit covered the demonstration of every phase of the world-wide campaign against tuberculosis, from allegorical paintings to the exhibition and demonstration of tuberculous tissues fresh from the victims; from the primitive cottage on the shore of Saranac Lake, to the vast sanatoria, veritable towns in themselves, maintained by philanthropic organizations, cities, states and nations; from the filthiest tenement to the most sanitary home for the tubercular; from the crude laws and ordinances of earlier days to the most modern statutes intended to suppress tuberculosis; from the stuffy, ill-equipped dispensary to the refreshing day camp and floating hospital; from the crippled tuberculous child in the crowded public school to the modern outdoor school for tuberculous children; from the destitute and neglected tubercular in his lonely den to the renovated, educated and assisted patient through the ministrations of the visiting nurse; from the kindergarten demonstrations of the value of outdoor life to children, to the most approved methods of outdoor life occupation and pleasure; from the dark, dirty, malodorous stable to the model dairy, with ample ventilation, sunlight, cement floor, proper drains and all modern appliances, and tuberculin tested cows in the stalls; from the given-up-to-die tubercular to the restored bread-winner; these, I say, and vastly

more formed the motif for the exhibit, in photograph, relief-map, miniature, chart, model, diagram and pathologic specimen.

The greatest value of this exhibit is to come to this country through the 200,000 people, young and old, who saw it, and have resolved to inculcate into their methods of living, much of its broad principles, not through any pen-picture of it no matter how skilled the artist.

I had the pleasure of a little chat with Prof. A. T. Stewart, superintendent of the public schools of the District of Columbia. He asked me what I thought of the congress. I replied that it was the biggest thing from an educational standpoint that had ever come to Washington. He then told me that he had sent one of his assistants down to study the exhibits and report to him that very morning, and if his answer were favorable he would order all teachers, and pupils above the sixth grade, to visit the exhibit.

Viewed broadly the exhibit exemplified the classical description of tuberculosis, as a communicable, curable, and preventable disease, and afforded a lesson in hygiene which the school-children of Washington could not afford to lose.

Now, through the initiative of the Charity Organization Society of New York and the Board of Aldermen of that city its school-children and public will be privileged to view the same great exhibit, to move which to New York required a special train of ten cars and 1,200 packing cases.

Among the pictures we have presented this evening, you will find one of a railroad coach belonging to the Missouri Traveling Tuberculosis Exhibit. A second picture of a public school exhibit. This, too, is a traveling exhibit, but is so constructed that two boys may carry it from school-house to school-house. These two pictures, very imperfect though they be, suggest two things;

first, that the American people, being suddenly aware of their painful and costly ignorance, are using American business methods to educate the masses by the so-called traveling tuberculosis exhibits; second, as the victory over tuberculosis is not to rest with this generation, we must educate the boys and girls. Hence there is no better point of attack than "in our public schools, where every ten out of eleven of all the children of the United States come under the jurisdiction of the public school system for approximately seven years of their lives, from seven to fourteen. No other department of our government has such an intimate relation to the whole population as has the public school system to its children." (L. H. Gulick, M.D.)

You, boys and girls of the Prescott schools, will find that the pupils of the next decade will know more about physiology and hygiene, the care of the body and the prevention of disease than you do, because these subjects will have been taught in a more exhaustive and comprehensive manner than at present. They will even count as "credits" in entering most of our colleges, in the very near future. I do not yet feel quite sanguine enough to say with A. E. Winship of Boston that "A teacher, or superintendent who will deliberately say that the disciplinary value of any subject now taught is greater than that which could be gained from teaching about tuberculosis is wanting in a knowledge of educational values."

We will now turn our attention for a few minutes to the second great division of the congress, the meetings of the sections. These were formally opened Monday, September 28th, under even more auspicious circumstances than the opening of the exhibit. Here the United States Government presided, with Secretary of the Treasury Cortelyou as the personal representative of President Roosevelt, in the chair.

As the Marine Band struck up the strains of a popular march, the official delegates from thirty-three foreign countries filed upon the stage. Some, like Koeh, were physicians of world-wide repute; others were army officers, resplendant in full uniform and royal decorations; others were ambassadors or attaches from the legations in Washington; and besides these, there were the officers of the congress, and the officers of the National Association for the Study and Prevention of Tuberculosis.

When those on the platform were seated, Secretary Cortelyou arose to open the session. (And right here I wish to relate a little incident which you did not see in the press reports, but which illustrates most forcibly the intense earnestness of this high official. Glancing over the men on the platform he failed to see a clergyman. Evidently none had been provided. Unembarrassed, he asked that audience of 4000 people to bow their heads in silent prayer to God, that He might be with us in our deliberations.) I will quote two paragraphs from Secretary Cortelyou's address: "It is a great honor to be called on to preside over this distinguished gathering, and particularly to do so as the representative of the President of the United States, whose welcome and whose good wishes I am commissioned to convey to you this morning. In the name of the American people, for whom he speaks, he congratulates you on what you have already accomplished, and upon the promise of much greater accomplishment in the beneficent work in which you are engaged. . . . We are living in a day of great moral and material movements. It is a time of uplift, of widening vision, of deepening research, of broadening co-operation. The days when a people of a state or a nation sat idly by and left to desultory investigation the study of evils which gravely menaced the welfare of large

numbers of people, are passing away, and in their place we find concerted action either under governmental inspiration, or with governmental encouragement, which in many instances is enlarged into such potent international organizations as this congress."

Secretary-General Fulton of the congress called the roll of nations, alphabetically, not according to diplomatic seniority, as is customary in functions at Washington. All responded in happy felicitations. When China was reached there arose a young Chinaman in American costume, Dr. Jee, a former Yale medical student, who greeted us in fluent English. He declared that the Chinese delegates had come to learn that China's medical system was antiquated, and that his country was much indebted to America and Europe for advances that have been made. "We must work out our own medical salvation through our own medical men," he added, and concluded by expressing hope that China might some day entertain the International Congress on Tuberculosis. When Germany was called, His Excellence, Prof. Dr. Robert Koeh, arose, and with him the whole assembly, who cheered him to the echo, saluting him with the *chautauqua* salute. Second only in vigor and spontaneity of outburst was that welcome accorded Dr. E. L. Trudeau of New York. He addressed us in these words: "As a pioneer and veteran in the struggle against tuberculosis in this country, I welcome the International Congress to our shores. For thirty-five years I have lived in the midst of a perpetual epidemic, struggling with tuberculosis both within and without the walls, and no one can appreciate better than I do the great meaning of such a meeting. I have lived through many of the long, dark years of ignorance, hopelessness and apathy, when tuberculosis levied its pitiless toll on human life unheeded and unhindered, when, as Jacoud has tersely put it, the treatment of tuberculosis was but a

meditation on death! But I have lived also to see the dawn of the new knowledge, to see the fall of the death rate of tuberculosis, to see hundreds who have been rescued, to see whole communities growing up of men and women whose lives have been saved and who are engaged in saving the lives of others. I have lived to see the spread of the new light from nation to nation until it has encircled the globe and finds expression today in the gathering of the International Congress on Tuberculosis, with all that it means to science, philanthropy and the brotherhood of man. But the end is not yet, and I bid you Godspeed on the great task that is before it."

I will now ask you to visit for a moment only, each of the seven sections of the congress.

Section I—Pathology and Bacteriology. Here Dr. William Welch of Johns Hopkins University is in the chair, a sufficient guarantee in itself of the success of the section. In this section the different modes of invasion of the germ and its different types of destruction of tissue, as well as the varieties and species of the tubercle bacillus were discussed. Or, "its function might be expressed as corresponding to that of a scientific medical clearing-house, from which many facts of great practical importance were issued. Clinicians, hygienists, sociologists, philanthropists, veterinarians, legislators, writers and citizens can all secure from this source negotiable scientific paper of great value, and in this respect, perhaps, the section performed its highest function."—(T. O. L., Nov.)

Section II—Clinical Study and Therapy of Tuberculosis. Dr. Vincent Y. Bowditch, of Harvard, in the chair. This polished gentleman from Plymouth Rock was a most agreeable presiding officer. This section embraced the clinical study and treatment of tuberculosis, as well as the study of sanatoria, hos-

pitals, dispensaries and the home treatment for the tuberculous. It was in this section that the methods of early diagnosis were discussed, as the X-ray, hypodermic injection of tuberculin, and the two new methods, the Calmette or ophthalmic, and the von Pirquet or cutaneous. It was this latter method which occasioned some very unfavorable comment through the ignorance of newspaper editors. I saw Prof. von Pirquet "innoculate" a number of children at the Children's Hospital, one mother bringing her six months old babe, with a wretched cough, for the test. I must say it is one of the most humane and harmless diagnostic procedures a physician may use.

In this section much time was spent in the discussion of sanatoria, and I believe with Dr. Frederick I. Knight of Boston, that, "that the establishment of sanatoria, public and private, has served not only to arrest the disease in many patients subjected to their strict regimen, but has been of incalculable worth in teaching preventive measures to many others." It therefore follows that a city's defensive agencies against tuberculosis are increased in proportion to its sanatoria, public and private.

Section III—Surgery and Orthopedics. Here we find the celebrated American surgeon, Dr. Charles H. Mayo of Rochester, Minn., in the chair. Here we are pleased to note improved methods in treating tubercular glands, joints and bones, and the innumerable deformities due to tuberculosis, and were greatly rejoiced to learn that future generations may hope to escape much of the surgery of the past because of better surgical methods used in conjunction with equally improved serum therapy.

Section IV—Tuberculosis in Children. Dr. A. Jacobi in the chair. This kind-hearted, sympathetic gentleman, with hair as white as the driven snow, has been a mighty guardian to the children of New York, and through his writing,

to the profession of the country. In this section we learn that, "The field in which the decisive battle of our future campaign against tuberculosis must be fought is the home; our chief enemy, infection in early childhood; our heaviest gun and our most crying need, camps, 'preventoria,' for the reception and cure of infected or exposed children before they have become unmistakably tuberculous" (Dr. Woods Hutchinson, N. Y.)

Section V—Hygienic, Social, Industrial and Economic Aspects of Tuberculosis. Here we learn that the total cost of tuberculosis in the United States exceeds \$1,000,000,000 per annum. Of this cost, about two-fifths, or over \$400,000,000 per annum, falls on others than the consumptive. (Prof. Irvin Fisher.) We also learn that our campaign cannot be won unless we pursue our microscopic enemy into the mills, and mines, the factories, furnaces and stoves of every State. (John Mattin, N. Y.)

Section VI—State and Municipal Control. Surgeon Wyman in the chair. In this section, some like New York City and the State of Maryland, may look with pride upon the inauguration of municipal and state control of tuberculosis, but most of us must blush for shame at the almost criminal negligence of our cities and states, "for we know how to prevent and how to cure tuberculosis, and the question of the eradication of the disease now lies in the hands of statesmen." (Dr. Latham, J. O. L.)

Section VII—Tuberculosis in Animals and its Relation to Man. There were many scintillating incidents in this section and its joint meeting with Section I, for Prof. Koch touched a live wire among the younger school of investigators, when he said, "that up to date, in no case of pulmonary tuberculosis, has the bacillus of bovine type been definitely demonstrated." This so-called younger school reckons among its num-

bers such leaders as Dr. Arthur Newsholme of England, Dr. Arloing of France, Dr. Theobald Smith of Harvard, and Dr. M. P. Ravenel of Wisconsin, all of whom have proven to their own satisfaction that most of the glandular, joint and intestinal tuberculosis of children is caused by the bovine bacillus.

"If the inclination of the general public does not drive it to correct the evils to which it is exposed through the use of impure, infected, and dirty milk, it should bear in mind that common humanity imposes various sacred obligations, among which pure, wholesome milk for children ranks near to the first place. We have no right to shirk this obligation, and would have no inclination to shirk or ignore it if we took the time and trouble to investigate the number of deaths, especially among infants, directly due to contaminated milk. Most intelligent persons who read have some knowledge of the fact that numerous babies die from no other cause than the use of impure milk" (E. C. Schroeder, M. D. V.)

At the close of this discussion Dr. Koch said: "Why should I object to a statement that I now admit that bovine tuberculosis can be transmitted to human beings, when, as a matter of fact, I never denied it." Dr. Koch's contention today is that tuberculosis of the lungs in the human, is rarely of bovine origin.

Many of you remember reading in the press reports how President Roosevelt appeared in the congress at its closing hour. "The hall was filled with several thousand foreign and American delegates who shouted themselves hoarse, following the President's address. Men threw their hats in the air and cheered like mad, while the women delegates cried themselves hoarse, and waved their parasols enthusiastically."—(*Washington Times*.)

A few paragraphs from that forceful address: "I could not deny myself

the privilege of saying a word of greeting to this noteworthy gathering. It is difficult for us to realize the extraordinary changes, the extraordinary progress, in certain lines of social endeavor during the last two or three generations, and in no other manifestation of human activity have the changes been quite so far reaching as in the ability to grapple with disease."

It is not so very long, measuring time by history, since the attitude of man toward a disease such as that of consumption, was one of helpless acquiescence in what he considered to be the mandates of a supernatural power.

"It is a short time since the most gifted members of the medical profession knew as little as any layman of the real cause of a disease like this, and, therefore necessarily, of the remedies to be invoked to overcome them. It is an affair of decades—I am almost tempted to say an affair of years—when we go back to cover the period in which progress has been made."

We have hastily reviewed the exhibits, we have visited together all of the sections, and you now ask me, "Is there no new cure for consumption?" I answer there is no new cure. Consumption is curable. In this congress we have remodeled, or rather made more effective, all our implements of warfare. The campaign, by the very nature of our foe, is projected into the future, and our designated points of attack are best enumerated in the resolutions passed by the congress, with which I close:

1. Resolved, That the attention of state and central governments be called to the importance of proper laws for the obligatory notification by medical attendants, to the proper health authorities, of all cases of tuberculosis coming to their notice, and for the registration of such cases in order to enable the health authorities to put into operation adequate measures for the prevention of

the disease. (Vide, Prescott City Council.)

Resolved, That the utmost efforts should be continued in the struggle against tuberculosis to prevent the conveyance from man to man of tuberculous infection as the most important source of the disease.

That preventive measures be continued against bovine tuberculosis and that the possibility of the propagation of this to man be recognized.

Resolved, That we urge upon the public, and upon all governments, the establishment of hospitals for the treatment of advanced cases of tuberculosis.

2. The establishment of sanatoria for curable cases of tuberculosis.

3. The establishment of dispensaries and day and night camps for ambulant cases of tuberculosis which cannot enter hospitals and sanatoria.

Resolved, That this congress endorses such well considered legislation for the regulation of factories and workshops, the abolition of premature and injurious labor of women and children, and the securing of sanitary dwellings, as will increase the resisting power of the community to tuberculosis and other diseases.

That instruction in personal and school hygiene should be given in all schools for the professional training of teachers. That whenever possible such instruction in elementary hygiene should be entrusted to properly qualified medical instructors. That colleges and universities should be urged to establish courses in hygiene and sanitation, and also to include these subjects among their entrance requirements, in order to stimulate useful elementary instruction in the lower schools. That this congress endorses and recommends the establishment of playgrounds as an important means of preventing tuberculosis through their influence upon health and resistance to disease.

HINTS FOR PERSONS SICK WITH TUBERCULOSIS.

BY GEORGE H. KRESS, M.D., LOS ANGELES, CAL., ATTENDING PHYSICIAN TO THE LOS ANGELES HELPING STATION FOR INDIGENT CONSUMPTIVES.

One of the first thoughts to be firmly planted in the mind of a person who has pulmonary tuberculosis (consumption of the lungs) is that *tuberculosis is a very serious disease*; a disease so serious, in fact, that one, out of every ten persons, dies therefrom. If the serious nature of this scourge can be impressed on such a person, then he or she is to get well and be cured.

A second thought for the patient to fully appreciate, is that *this disease is also one of the most curable of all diseases*, when the right efforts are made to overcome it in its early stages; and that even in its advanced stages, under most discouraging surroundings, it has been possible to restore to careers of usefulness many lives.

This pamphlet on hints for persons sick with tuberculosis, will only outline preventive measures, briefly discuss medicinal measures, and consider more at length, the hygienic-dietetic treatment.

I. PREVENTIVE MEASURES.

A person with tuberculosis usually *acquires the disease, directly or indirectly*, from some other person who has tuberculosis. The disease is usually transferred from the sick person through the sputum which is coughed up by the sick person. This sputum contains the little plant or germ which is the direct cause of the disease. This

parasitic germ is and must be present always in the tissues, where there is tuberculosis.

The best way to prevent the action of this tuberculosis germ is to keep it from getting into the bodies of healthy persons, and the easiest way of doing this is to *destroy all sputum that is coughed up*. This is accomplished by expectorating the sputum into cloths or papers or paper spit cups that can be burned, or into spit cups or cuspidors that either contain a disinfectant solution like five per cent. carbolic acid or ordinary lye, or that may be steamed or boiled or otherwise disinfected. Don't let the sputum dry anywhere, and so prevent it from being blown about, to get into the air we breathe, the food we eat, or the things we handle.

Persons sick with tuberculosis *should not speak or cough* into other people's faces; they *should not kiss* people or children; they *should wash their hands* before meals and whenever sputum gets on them; they *should have separate eating utensils*, which should be *separately boiled*; and they *should have a separate bed*, and, if possible, a *separate well lighted and ventilated room* in which to live. In short, to prevent tuberculosis, the person who has the disease and who is coughing up the germ laden sputum, must allow no lapse in his habits or in his vigilance of trying to keep this germ laden sputum from directly or indirectly reaching other human beings.

SUMMARY OF MEASURES USED IN TREATMENT.

For the purpose of this paper, a summary of the measures used in the treatment of pulmonary tuberculosis might be arranged as follows:

I. HYGIENIC DIETETIC	A. Surroundings	a. Physical.....	1. Climate 2. Locality 3. House
		b. Mental.....	1. Social 2. Temperament
	B. Diet.....	a. Habits of eating	
		b. Foodstuffs	
	C. Mode of Life	a. Clothing	
		b. Baths.....	1. Air 2. Sun 3. Water
		c. Rest.....	1. Mental 2. Bodily
		d. Exercise.....	1. Lung 2. Bodily
		e. Amusements	
II. MEDICINAL	A. Symptomatic		
	B. Elimivative		
	C. Tonic		
	D. Immunizing	Tuberculins	

The above measures will be considered, each in turn.

II. HYGIENIC-DIETETIC MEASURES.

As regards the hygienic-dietetic measures, this portion of treatment is of the very first importance. No matter what medicinal measures are used, *the attention to surroundings, diet and mode of life must form the basis of all successful efforts to overcome tuberculosis.* Without attention to these factors, the fight is apt to be in vain.

It has been the demonstration of this fact that has been responsible for the more modern opinion that *tuberculosis is curable in any climate.* Also that the *patient living in an undesirable climate,* who will make an honest effort to avail himself of the curative elements of such a climate, has a better chance for recovery than the *patient who goes to a more distant clime,* but who through lack of means, knowledge or willingness, fails to live up to that mode of life which has proven to be so neces-

sary, if the body is to conquer the tuberculosis germ and the disease it produces.

Climate in General as a Curative Factor.

Tuberculosis of the lungs can be and is cured in all kinds of climates.

That climate is the best for any particular patient, where that patient can live the hygienic-dietetic life most comfortably and contentedly.

The best climate in the world, if associated with poor food, uncomfortable surroundings and homesickness, *is worse by far than a poor climate,* with good food, comforts, contentment, desire to get well, and willingness to live the proper life.

Climates are good for tuberculosis in so far as they contain uncontaminated oxygen, much sunshine, comparative dryness, daily temperature variations that are not too extreme, and surroundings that make for nutritious living and contentment.

To leave an Eastern State for Arizona or California and upon arrival there to live in a poorly ventilated room and on insufficient food and rest, is worse than staying at home with comforts, nutritious food and good nursing.

Locality as a Curative Factor.

Other things being equal, the country is better than the city, and a moderate elevation better than the low lands.

When one can choose, a beautiful scenic outlook is to be preferred.

The soil should be dry and of a nature to drain rapidly after rains.

Freedom from excessive dust and wind storms is desirable.

The foothills are better than the beaches.

A region is desirable when it has pure air, lots of sunshine, not too much moisture, and temperature variations not so extreme as to prevent the out-of-door life to the fullest possible extent.

Other things being equal, that locality is to be preferred, which in addition to the atmospheric factors just given, also has facilities for good food and pleasant houses and surroundings.

The House as a Curative Factor.

The ground on which the house stands should be dry and well drained.

That house is to be preferred which contains rooms that can be easily ventilated, and which, during the day, can be flooded with outside air and sunlight.

A room with a southern exposure is usually desirable.

The tuberculous patient should have a separate room, if possible, and always a separate bed.

Social Surroundings as a Curative Factor.

The persons with whom the patient lives and associates, should be willing

to co-operate with him in living the life laid down by the physician.

The patient's friends cease to be friends when they give advice on treatment and other things, concerning which they know little or nothing.

The advice of well-meaning but foolish and ignorant friends has been responsible for the death of many patients who were on the road to recovery.

The patient's family are to be preferred as associates, to strangers, provided that neither the family nor the patient plays the role of tyrant.

The Patient's Temperament as a Curative Factor.

The patient's condition of mind is of the very highest importance.

It is never too late for the hopeful patient to begin the fight against the disease.

A contented, happy, courageous mind is worth a host of ordinary tonics.

Willingness on the part of the patient to follow the advice and do the things laid down by his physician, is most important.

And equally important, must be the unwillingness by the patient, to accept the advice of others than the physician.

Tuberculosis follows a path of many windings and obstacles. One guide who knows the road and way out, is worth a host of chance and guess pilots. Hold fast, therefore, to the tried physician, in whose care you have given yourself.

Habits of Eating as a Curative Factor.

Three meals a day, with single in-between lunches for patients who are up and about, are an ample sufficiency.

Food should be eaten slowly.

The condition of the teeth and mouth should be looked after. Particularly after milk should the mouth be rinsed.

A dainty table service acts as an appetizer. Do not let the remains of previous meals remain on the table, to take away the appetite.

Food-stuffs as Curative Factors.

To get a maximum amount of energy and nutrition from the foodstuffs eaten, with the least possible work on the part of the stomach, is the purpose of a dietary in tuberculosis.

Milk, eggs, rare meats form the basis of many diet lists.

Fruits and laxative foodstuffs are desirable.

Avoid fried foodstuffs, pastries and rich sweets.

Three ordinary meals a day on which the body is to hold its own, and enough milk and eggs in the ten and three o'clock lunches to build up a nutritional reserve, is not a bad plan to follow.

Clothing as a Curative Factor.

Just enough clothing to keep the body warm, light woollens or the linen meshes preferred.

Do not wear so much underclothing, so as to bring on perspiration. If such perspiration evaporates too rapidly, the skin is chilled and the lungs are liable to increased congestion and inflammation.

At night keep the feet and body comfortably warm with sufficient bed clothing. The same holds true during rest out of doors during the day.

Do not wear chest protectors. They weaken instead of strengthening the chest, and predispose to colds.

To keep warm in cold weather, or in the shade or wind use overcoats and top clothing, rather than an excess in amount of underclothing that will bring on a perspiration and under proper conditions be responsible for colds and inflammations.

The clothing should be loose, any clothing which hinders free breathing and movement of the body is detrimental. This applies especially to the clothing of women.

Baths as Curative Factors.

The baths to be considered are of three kinds, *air, sun and water.*

Of these *the air bath is the most important.* The *tuberculous lung should be constantly bathed in pure air.* This is accomplished by being out in the open as much as possible during the day, and by sleeping on a porch or in a well-ventilated room at night.

The *outside night air* is nearly always more pure and more beneficial to healing than any inside-room air, certainly always better than that of a poorly ventilated room.

Sun baths are to be used with discretion. The *head should be protected* and the skin should not be exposed sufficiently to inflame or burn. The time of exposure depends upon the intensity of the sunlight.

Cleansing water baths should be taken once or twice a week, at a comfortably warm temperature, and usually before going to bed.

Tonic water baths are most easily given by means of the sponge. A quick sponging of the chest and trunk by means of a sponge or wash cloth, with water at ordinary hydrant temperature, followed by drying with a soft towel and a rub with a rough towel, sufficient to bring a glow to the skin. These are best given on rising in the morning.

Rest as a Curative Factor.

Rest of mind and body are nearly always needed by the tuberculous patient.

An active or worrying mind will use up energy that should go to the repair of the diseased lung tissue.

The *patient with tuberculosis should never hesitate to rest*, when so disposed. Rest in the pure air, to the body that needs it, and the body of the tuberculous patient nearly always does, is almost always beneficial.

A *brief rest, lying down, before meals*, acts often as an appetizer, and a *rest for a half hour* or so afterwards helps digestion.

Rest should always be taken in the pure air. If in the room, the windows

should be open and if the temperature is cold, the body should be kept warm with sufficient clothing and coverings.

Night sleep should not be neglected and eight to ten hours of such sleep, in a well ventilated room or on a screened porch, should be striven for.

Exercise as a Curative Factor.

When a *tissue is diseased*, nature always seeks to aid its repair, by giving it *rest*. This rule holds good with the diseased portion of the lungs, and such portions lag more than the healthy tissue.

No lung or *breathing exercise* should be taken *except on the advice of a physician*.

Instead of breathing exercises in which an attempt is made to get too much air in the lungs in a few minutes, aim to get *sufficient pure air in the lungs, every minute of every hour of every day*.

An easy rule for a *proper position of the chest* is to hold the head up, with the neck pressed against the collar.

Bodily *exercise, if not used with discretion*, may be dangerous. More than one patient has walked or exercised himself to death.

The rule for exercise is for the patient to *always stop before he feels fatigued*. No matter what the exercise, whether it be great or small, if the body be fatigued therefrom, it is probably harmful.

Patients with fever, had better take their walks in the morning, when the fever is not present. Patients with fever should always consult their physician about exercise. With such patients exercise requires the same discrimination as powerful medicines.

Amusements as a Curative Factor.

Amusements are like exercise, *if in just sufficient amount* to relax the mind

and body, without strain or effort, they act as a tonic and are beneficial.

Cards and other games are *harmful when they are sufficiently exciting* to cause an increase in the fever.

Theaters are harmful not only because of the exciting character of many plays, but also because of the crowd and impure air.

III. MEDICINAL MEASURES.

The nature of the medicinal medication will depend largely on the physician.

A word about the physician. The patient with tuberculosis who wishes to get well will content himself with *only one physician at a time*. Such a patient will *carefully obey the instructions* of the physician, *will not talk* about his condition to other persons and *will not let other persons give him advice*. Time and again, the great harm of such advice has been shown.

The disease is treacherous and hard enough to overcome at best, without having the patient in a constant whirlpool of doubt, wondering whether to do or to experiment with this, that or the other remedy, advised by this, that or the other person who without intelligent knowledge or learning, is sure that his particular remedy or advice will lead to prompt and decisive cure. Where trained and experienced physicians fail, the chances of failure is far greater by those who have neither learning or experience.

Let your physician be your guide. He will map out your mode of life, will try to keep you from falling into pit-falls of the hygienic-dietetic life and will advise those lines of medication which in his judgment seem best for your particular case. He will individualize his treatment to make it fit your particular case. *Individualization in treatment is of the highest importance in tuberculosis* and this makes necessary, skilled medical supervision.

Symptomatic Measures, as Curative

Factors.

Cough is often a distressing symptom. The patient should teach himself to *keep down the cough*, except when secretion has accumulated that must be coughed up and expectorated.

A very large proportion of coughing among tuberculous patients is a *habit cough*. *Avoid and strive to overcome such a habit*. Unnecessary coughing pulls and tears at the lungs and helps spread the germs from the diseased to the healthy portions of the lungs.

A glass of milk, preferably warm, will often lighten the *morning cough*.

Avoid patent cough medicines. They nearly always *contain opium and alcohol*. They suppress the cough, but they do not do away with the things that cause the cough. Even though the cough is less, the disease is probably growing worse. These medicines also interfere with digestion and fasten dangerous habits upon the system.

For the *pain in the chest*, local remedies like painting with tincture of iodine should be tried before opiates.

In case of unexpected hemorrhage, try to avoid being excited. *Few people die of hemorrhage*. Get into a comfortable position, avoid talking, have the clothing loosened, the room cool and quiet, and then let your physician be your guide.

For other symptoms, let your physician advise what treatment may be necessary.

Eliminative Measures, as Curative

Factors.

Elimination is through the bowels, the kidneys, the skin and the lungs. Here we need concern ourselves only with the bowels.

The patient should have a *bowel movement daily*. If a regular time and habit and proper diet be insufficient to induce such a movement, then recourse must be had to mild laxatives

like the fluid extract of cascara, or to salines like salts or seidlitz powders.

Tonics, as Curative Factors.

Remember that *pure air is one of our most powerful tonics*. Herein lies much of the value of the hygienic-dietetic life.

Avoid cod liver oils and such like preparations unless prescribed by your physician as being good for your particular case.

Avoid wine, whisky and other liquors unless prescribed in definite amount by your physician.

Tonics are often valuable aids, but *discrimination is needed in their use*. Here, as in foods, what is good for one, is poison for others.

Immunizing Measures, as Curative

Factors.

In all *infectious diseases* (diseases caused by living organisms or germs), *Nature seeks to overcome these invaders* by having the blood and tissues of the body manufacture substances that will not only neutralize the poisons thrown into the tissues and circulation by the germs, but which will make the body tissues and fluids an undesirable home for the germs.

In *some infectious diseases*, Nature is able to accomplish this result with considerable success. Not so, however, as regards tuberculosis.

To *help stimulate the body to produce these substances* which are antagonistic to the germs and the poisons which the germs produce—in other words, to stimulate the body to build up an *artificial immunity*, if possible, a line of remedies known under the general name of *tuberculins* have been brought out. These, however, cannot be discussed here. The tuberculins, more than any other remedies used in tuberculosis, require skill in their application. They must never be given except by a physician, and they are mentioned here simply to make this brief discussion complete.

THE CARE OF TUBERCULOSIS PATIENTS AT THE LOS ANGELES COUNTY HOSPITAL.*

BY D. C. BARBER, M.D., LOS ANGELES, CAL., SUPERINTENDENT OF THE LOS ANGELES COUNTY AND CITY HOSPITAL.

A County Hospital may be likened to one of our tourist hotels, in that its inmates hail from almost every country.

In the matter of securing guests we have, however, some advantages over the hotel. We are not under the constant necessity of issuing circulars to the public to attract our guests, or maintain a bureau of advertising to keep our rooms filled. In fact, the opposite obtains, for the most difficult and least attractive task of hospital management is the daily issuing of invitations to our inmates to vacate their rooms, and make way for the constant stream of applicants seeking admission to the comfortable beds and wholesome bill of fare provided.

Many and varied are the devices and excuses offered why their stay in the wards should be prolonged indefinitely. Many are pathetic, while some are skillfully deceptive and amusing.

Before describing the tuberculosis quarters of the County Hospital, I wish to dwell for a few moments upon the source of supply of patients, which presents a serious and practical problem for you, as citizens of this community, to solve.

We are all in thorough accord as to the sympathetic and humanitarian side of the question, otherwise we would not be assembled here tonight. We suffer a penalty for dwelling in a well-advertised and attractive climate. Physicians in the East for various reasons, legitimate and selfish motives, send patients to this community who should never leave their comfortable homes and the society of sympathetic relatives or friends, to spend their few remaining weeks of life among strangers.

From one of the railroad stations the poor consumptive hies him to a lonely, dark room in illy-ventilated, cheap lodging-house, where he remains until his scanty means for rent and food are exhausted, or he is discovered by a landlord fearful of losing other alarmed roomers and who ushers the poor victim into the street, or telephones for the County Hospital ambulance.

Many times we have been telegraphed to meet these patients at the depot when they have absolutely no legal claim upon the charity of this community. Adjacent county officials think it a joke to present their indigent consumptives with a lunch and railroad ticket and dump them upon the lap of our Associated Charities, or into the wards and tent-houses of the Los Angeles County Hospital. The Mayors and city officials of far Eastern cities, churches, and charitable organizations will raise a small purse for transportation to our city, with instructions to appeal to the noble-hearted inhabitants upon their arrival for future aid and sustenance. When they die we notify the Eastern relatives, who in turn inform us that their last dollar was donated to the deceased for transportation, and they have nothing left for his burial.

These unfortunate, deluded creatures often wander about our streets expecting each morning to awaken free from cough, strong enough to take up work at the numerous occupations they have been told are awaiting every new arrival in our midst.

These are not exaggerations of facts, but true statements by many I have interviewed upon their arrival at the

*Read before a meeting of the Los Angeles Society for the Study and Prevention of Tuberculosis, December 4, 1908.

doors of the County Hospital. For fear we will not receive them, many previous to their departure from home are carefully coached and instructed to say to us that they have been residents of this county for more than one year, and therefore entitled to shelter in our institution.

In past years, numerous cases, upon their appealing to the Associated Charities for aid, have been furnished free transportation and returned East to the places from whence they came.

This naturally suggests the broad and difficult question, of how are we to lessen the ever-growing practice of utilizing Los Angeles county as a dumping ground for Eastern indigent consumptives.

We do not pretend to shirk our responsibility to those who rightfully belong to us, who have obtained a residence and contracted tuberculosis here. Is it right for the taxpayers and charitable people of this community to go much farther? How shall the increasing expense of caring for foreign indigents arriving in our midst be met? Not until our laws are changed, or new ones enacted, can we hope to be relieved of the present injustice.

Every county in the State should be compelled to provide for all of its own poor, and should not be permitted to foster dependent sick upon their neighbors, and thus at the same time shirk financial responsibility.

Many counties in this State are so selfish they will not provide and support a County Hospital. In some foreign countries—notably Germany—each State is compelled by law to pay the expenses of its poor when they fall sick in another State. In that country every man's registration is recorded and known, and when he becomes a charitable charge away from home he is cared for by the authorities where he happens to fall ill. A bill for his actual

care and expenses is sent to his legal residence and must be paid.

Not until our State Legislatures, or the National Government, regulates this matter by law can Southern California hope to secure justice and proper recompense for charity doled out to others than its own needy citizens.

Inhabitants of the counties in New York or Ohio do not move from one to the other for the benefit of their health, or seeking climate, hence those States are not interested in this question as California is. She is yearly paying increased penalty for possessing a health-giving climate.

This brings us to my subject proper: "The Care of Tuberculosis Patients at the Los Angeles County Hospital." Admission is obtained in various ways. Many are sent direct from the Associated Charities or free medical college clinics, where they first appear for aid and treatment. Some come from other hospitals after their means are exhausted. Many are sent by physicians who become weary of donating their services, and not a few, as has been already mentioned, are taken direct from trains as they arrive. They are supposed to have been residents locally for one year, but when a human being, too sick to work and having no money, applies for help at your doors there is only one thing to do—*admit him*, and do the best you can to aid and comfort the unfortunate one.

Most of our cases can be classed as incurable, or in the so-called second and third stages of invasion. We have eighty beds; every one is occupied to-night. Thirty-five are in wards and used by patients too weak and ill to be cared for in the tent-houses where we have forty-five beds for those classed as ambulatory cases, who are able to walk to their meals. As their strength fails they are graduated to the wards, where many die and others take their places.

We are compelled to crowd too many together for sleep and comfort, but I am happy to announce that this week your Board of Supervisors, realizing the situation, voted to immediately erect a new, modern, and up-to-date pavillion to relieve our present overcrowded and congested tuberculosis quarters.

By way of treatment, patients are encouraged to breathe in fresh air, given nourishing diet. Comfortable beds in steam-heated quarters are provided; sputum cups are furnished, and their dishes are kept separate in a separate dining-room where they are sterilized in boiling water.

Owing to the advanced stage of the disease in our patients, many are morose and deficient mentally, so that they will not aid themselves in the battle for improvement, or for the pro-

tection of others against infection through promiscuous expectoration about the wards and grounds.

The tubercular wards are in charge of a physician who visits them at least twice a day, and may be called oftener by the nurses if necessary.

In closing, there is another subject I would briefly treat upon; namely, the establishment of tubercular pavillions in the nearby foothills for the housing of consumptives by the county.

If the inmates could be limited to *bona-fide residents*, it would be an ideal plan, and has been frequently suggested. In my opinion such an establishment will not be feasible in justice to an already overtaxed people, until other communities are compelled to take care of their own, or are willing to honestly recompense this county for the same service.

Are you an annual member of the State Association,
and if so

**Have you paid your
Membership Dues for 1909?
If not, kindly send check for \$1.00
to the secretary,**

Dr. George H. Kress, 240 Bradbury Building, Los Angeles, Cal.

Until California is educated concerning the tuberculosis problem, the work must be carried on through private effort and subscriptions. Your membership fee will help distribute many pieces of literature to those who sadly need it, as well as give an impetus to the formation of new centers of anti-tuberculosis activity. Lend a hand.



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The Bulletin

OF THE

California Association for the Study and Prevention of Tuberculosis

A BI-MONTHLY PUBLICATION

George H. Kress, M.D., Editor.

(Application for entry as second-class matter at the Postoffice at Sierra Madre, Los Angeles County, California, pending.)

The aim of this publication is to promote the study and dissemination of knowledge concerning the prevention and cure of tuberculosis, to aid in the establishment of institutions intended for those purposes, and to co-operate with such organizations as can render aid in the solution of the tuberculosis problem.

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Editorial contributions may be sent to the office of publication, care of Miss Gertrude Tucker, Manager, P.O. Box 141, Suffolk Ave. and Sierra Madre Place, Sierra Madre, Cal.

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First Vice-Pres...Dr. George H. Evans	Secretary.....Dr. George H. Kress
San Francisco	240 Bradbury Bldg., Los Angeles
Second Vice-Pres. Dr. Chas. C. Browning	Consulting Medical Board:
Monrovia	Dr. F. M. Pottenger.....Chairman
Third Vice-Pres...Mrs. S. S. Palmer	Dr. George H. Evans Dr. Norman Bridge
San Francisco	Dr. W. Jarvis Barlow

Local Affiliated Associations in California

(Arranged alphabetically)

Alameda County Society for the Study and Prevention of Tuberculosis

President.....Dr. Edward Von Adelung	Secretary.....Miss Mary Page, Berkeley
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Long Beach Society for the Study and Prevention of Tuberculosis

President.....Mrs. Emma Greenleaf	Secretary.....Dr. F. L. Rogers.
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Los Angeles Society for the Study and Prevention of Tuberculosis

President.....Dr. George L. Cole	Treasurer.....Mrs. Berthold Baruch
First Vice-Pres...Edwin T. Earl	Executive Committee—President, Secretary, Treasurer, Joseph Scott, Philip Forve, Dr. W. Jarvis Barlow, W. Le Moynes Wills.
Second Vice-Pres. A. L. Stetson	
Secretary.....Dr. George H. Kress	

Monrovia (Visiting Nurses' Association)

President.....Mrs. John H. Bartel	Secretary.....Mrs. W. Judson Smith
Vice-President. Mrs. M. L. Butts	Treasurer.....Mrs. J. J. Renaker
Vice-President. Mrs. Hardy Harris	

Pasadena Society for the Study and Prevention of Tuberculosis

President.....Dr. Henry Sherry	Third Vice-Pres... Mr. C. B. Scoville
First Vice-Pres... Dr. Chas. Lee King	Secretary.....Dr. E. H. McMillan
Second Vice-Pres. Mrs. Fordyce Grinnell	Treasurer.....Mr. A. Gosney

Redlands Society for the Study and Prevention of Tuberculosis

President. Dr. Hoell Tyler	Vice-Pres. Dr. J. E. Payton	Secretary. Dr. Gayle G. Mosely
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Sacramento (White Cross Crusaders)

President.....Dr. W. A. Briggs	Director.....Frank T. Dwyer
Vice-Pres.....A. Bonnhelm	Director.....E. Chas. Hemmings
Treasurer.....C. M. Goethe	Director.....W. F. Geary
Secretary.....A. L. Crane	

San Diego Society for the Study and Prevention of Tuberculosis

President.....Dr. Fred Baker	Secretary.....H. A. Thompson
Vice-Pres.....Dr. J. A. Parks	Treasurer.....Dr. Thos S. Whitelock

San Francisco Association for the Study and Prevention of Tuberculosis

President.....Thos. E. Hayden	Executive Committee—President, Secretary, Treasurer, Mrs. Jno. F. Merrill, Mrs. William H. Crocker, Dr. George H. Evans, Dr. Harry M. Sherman and Walter MacArthur.
First Vice-Pres... Dr. Herbert C. Moffitt	
Second Vice-Pres. Mrs. Jno. F. Merrill	
Secretary.....Dr. Wm. C. Voorsanger	
Treasurer.....The Crocker Nat'l Bank	

Santa Ana Society for the Study and Prevention of Tuberculosis

President.....J. N. Anderson	Third Vice-Pres... Mrs. F. P. Nickey
First Vice-Pres... Dr. G. H. Dobson	Secretary.....Dr. John Wehrly
Second Vice-Pres... Dr. Willela Howe-Waffle	Treasurer.....D. H. Thomas

Santa Barbara Society for the Study and Prevention of Tuberculosis

President.....Dr. Wm. H. Flint	Secretary.....Dr. Rexwald Brown
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Sierra Madre Society for the Study and Prevention of Tuberculosis

President.....E. W. Camp	Secretary.....Lieut. C. B. Street
First Vice-Pres... Dr. R. H. Mackerras	Treasurer.....George Humphries
Second Vice-Pres... Mrs. C. H. Baker	

EDITORIAL.

THE ANNUAL MEETING OF THE CALIFORNIA ASSOCIATION.

The annual meeting of the California Association for the Study and Prevention of Tuberculosis has been called for Wednesday afternoon, April 21, 1909, at 2 p.m. at the Hotel Vendome, San Jose, California.

At this meeting the reports of the retiring officers will be given, their successors will be elected, and new plans for the future made.

While organization work has moved forward with considerable vigor, lately, much remains to be done.

The slogan should be—A Society for the Prevention of Tuberculosis in every city in California.

Every such society means organized, and to that extent, more constant and intelligent effort against this scourge, which blackens the Golden State with a percentage of more than 13 per cent. of all its mortality.

We have stated on previous occasions and we again repeat what is a fact—the tuberculosis morbidity and mortality of California is a distinct menace to the public health of the State, a menace that it is as criminal to neglect as it would be if one were indifferent to armed ruffians on our streets who were threatening murder to our citizens.

Tuberculosis is constantly threatening such murder in California, and sadder still, is making good its threat.

This is not a problem to be passed up to the State and City Health Boards for solution.

Here we deal with menace of such wide ramifications that it is the duty of all citizens to take cognizance of the criminal.

To help educate our people to their responsibilities in this problem, the California Association was organized. It

is the legitimate successor of the Southern California Society, which in turn was the seventh anti-tuberculosis organization to be formed in the United States.

The California Association, in order to allow the local societies to have a full growth, has refrained from seeking memberships in places where local societies exist. If this policy is to continue and the California Association to also exist, it stands to reason that the local societies must give a pro rata of their annual dues for the expense incident to the printing of the BULLETIN, etc.

The Association has been a powerful factor in the educational campaign in our State. Its work is particularly the work of prevention, of prevention on a large scale, a line of work conceded by our foremost workers as being of the very first and paramount importance over all other lines of activity.

The societies listed in this BULLETIN show what has been accomplished through the enthusiasm of a few devoted workers. How much more may be accomplished, when we all work shoulder to shoulder in this great warfare.

Let all who are interested and can attend the annual meeting, which will be held at the same time and place as the annual meeting of the Medical Society of the State of California, at San Jose, on April 21st.

HOW TO ORGANIZE A LOCAL SOCIETY

Our experience in forming city and district anti-tuberculosis societies has taught us to follow a certain line of action and method, as being along the lines of least resistance and therefore likely to give the best results.

For the benefit of those who may be interested in the matter—and there are a host of cities and of men, doctors and laymen, who should be interested—we outline the method we have been following.

The important point is to work up an enthusiasm for the project and then to complete the organization and place the responsibility of subsequent work on officers, before the enthusiasm and interest wanes.

Don't, since we must have a "don't"—don't kill the enthusiasm discussing an abstract constitution and by-laws. Adopt in toto the constitution and by-laws of some other society, elect your officers, and then if the by-laws are not satisfactory, amend them. But organize first.

The first step is to find two or three persons who are interested in the subject. A medical man, or society, a member of a woman's club, or of a civic organization or any other citizen, who is impressed with the importance of this problem can easily initiate the movement.

Let such person, or persons, talk the matter up in their organizations and among their friends and secure, if possible, the promise of friends to join such an anti-tuberculosis society if organized.

At Santa Ana, for instance, Dr. John L. Dryer passed some sheets of paper among his friends, which stated at the top, that the undersigned persons agreed to join the Santa Ana Society for the Study and Prevention of Tuberculosis when organized, and some ten of his medical colleagues each secured about ten names on their respective slips, and that society started its career with a membership of almost one hundred and fifty.

Interest the newspapers, the school and health boards, the women's clubs and the medical societies, and then call a public mass meeting in a favorably situated hall.

Write to the Secretary of the State Association and he will try to have a stereopticon lantern and a lecturer on hand for the display feature. Pictures always help draw an audience and in the warfare against tuberculosis they play a very important educational role.

Have a prominent citizen, like the Mayor or president of the school board or medical society, and let him state the object of the meeting and introduce the speaker of the evening.

This lecture is usually on the causes, prevention and hygienic-dietetic treatment of tuberculosis.

Let it be followed by remarks by one or two medical, clergyman or laymen, one of whom has in his hand and presents for adoption a resolution somewhat as follows:

"Whereas, Tuberculosis is a disease of such widespread and serious scope as to be a menace to the public health of the people of our State, and as we are met together this evening to consider ways and means of its prevention and relief;

"Therefore, Be It Resolved, That we herewith form an organization to be known as the _____ Society for the Study and Prevention of Tuberculosis, the object of which shall be the prevention and relief of tuberculosis in our community; and,

"Be It Further Resolved, In order to expedite our organization, that we herewith adopt the constitution and by-laws of the Los Angeles Society for the Study and Prevention of Tuberculosis, as printed on pages 8 to 11 of the January, 1909, State Tuberculosis BULLETIN, as the constitution and by-laws of this society, substituting the name of our city for that of Los Angeles wherever necessary."

This one resolution organizes the society and gives it a constitution and by-laws.

Some other person present, who has been previously requested to do so, then moves a committee of three on

nominations be appointed. This committee is usually known beforehand by the chairman, and the officers to be nominated are usually decided upon in the preliminary conferences of those most interested.

While the nominating committee is out, membership blanks can be passed through the audience, or one or two short speeches be made.

When the nominating committee reports, a motion is made that the Secretary cast the ballot of the Society for the names presented.

Thus, in the course of one evening, a society can be formed and placed on a firm foundation, with the foremost citizens of the community on its Board of Directors. As only ten directors are nominated, nine additional directors are elected by the Board at a subsequent meeting.

The minutes of the Pasadena Society, printed in this BULLETIN, are a good example of the method above outlined.

Every community in California has

its tuberculosis problem, of greater or lesser extent. If in your own city there be no society organized as yet, will you not take the matter up and initiate the movement?

Do not wait for others. You have as good right as any to initiate such a movement. If others begin about the same time, consolidate your efforts. But above all else, *begin*.

Do not let the knockers or the pessimists discourage you. If the world depended on destructive critics for progress, little would be accomplished in this world.

Such a society, if formed, if it did nothing more than call the attention of local citizens to this great problem, would have an abundantly good reason for being. If you elect an energetic president and secretary, you need not worry but that your society will do a great deal more.

"Lend a Hand."

"Do It Now."

K.

NOTES OF THE WORK.

CALIFORNIA TUBERCULOSIS DEATH ROLL LAST YEAR.

The subjoined Associated Press dispatch should be of special interest to the readers of the BULLETIN:

WHITE PLAGUE WORST. Leads Other Diseases.

Sacramento, Feb. 20.—Heart disease was the principal cause of death in San Francisco during 1908, while in Los Angeles tuberculosis was the most fatal malady of the year, according to statistics announced today by the State Board of Health. Of *San Francisco's* 6260 deaths last year, 1054 were brought about by heart disease, and 845 by *tuberculosis*.

Tuberculosis and lung troubles caused 1179 of *Los Angeles* 6011 deaths.

Deaths from heart disease number 837.

The leading epidemic in both cities was typhoid fever, 81 deaths resulting from it in San Francisco during the year and 83 in Los Angeles.

ALAMEDA.

The Oakland *Tribune* speaks as follows of the initial meeting of the Alameda Society:

SOCIETY TO BE FORMED TO STAMP OUT TUBERCULOSIS.

Noted Workers to Permanently Organize.

Members of the medical profession, ministers, nurses and clubwomen of the bay cities gathered last night at the Oakland College of Medicine and Surgery to discuss plans for organizing a tuberculosis society in Alameda county, for the purpose of stamping out the white plague. Dr. H. G. Thomas pre-

sided at the meeting. Miss Mary Page of Berkeley, who was instrumental in arranging the meeting, was chosen temporary secretary. Dr. Edward Von Adelung opened the discussion of the evening upon the subject of tuberculosis.

"About 200,000 people die in the United States annually of tuberculosis," said Dr. von Adelung, in addressing the meeting. "At the present time about 5,000,000 people are doomed to die. One-seventh of the deaths is due to tuberculosis. Tuberculosis causes a monetary loss of one billion dollars a year to the United States.

"In California 4607 died in 1907 of tuberculosis, and 4437 in 1906. In Southern California one-fifth of all the deaths are from tuberculosis. North of Tehachapi only one-eighth of the deaths are due to tuberculosis. Five per cent. can be cared for in the sanitariums, but the balance must have home treatment.

Conditions Deplorable.

"The death rate in California is larger than any other State in the United States. It has done less than any other State for the cure of tuberculosis. The conditions in this State are deplorable for the cure of tuberculosis."

Dr. von Adelung recommended that the society teach the principles of hygienic living. He suggested that a number of chest experts form a clinic, to be engaged for the purpose of examining tubercular patients. He also suggested that trained and interested people teach the poor how to arrange their rooms and instruct them how to prepare their meals. The distinguished physician attended the international convention on tuberculosis and has studied the various phases of the disease carefully.

Dr. R. G. Moody, of Berkeley, recommended open-air living for tubercular patients.

Can Be Stamped Out.

Dr. Frederick D'Evelyn, of Alameda, said:

"It is an awful irony upon California to think that in this State, where the climate is so agreeable, that we have so much consumption. Let us cure this horrible incubus. We can stamp out tuberculosis in five years."

Dr. H. G. Thomas suggested having a tuberculosis day in the churches, but no date was set for it. Rev. Clifton Macon stated that the clergy could do much in the way of explaining the seriousness of the white plague.

Miss Grace Graham, one of the workers of the Associated Charities, said that it was necessary to have a special fund to care for the tuberculosis cases. It is too much of a drain upon the general fund to constantly draw on it. Tubercular patients need special food.

It was the consensus of opinion of the medical men present that the plague must be fought in the open air, and that the disease can be suppressed by sanitary and wholesome conditions in the homes.

No action was taken at the preliminary meeting regarding the future work of the society, which will be permanently organized at its next meeting. A committee of five will be appointed to frame a constitution for the organization which will endeavor to stamp out the dread disease within five years.

Members Register.

Among those who registered as members of the society are: F. A. Foss, County Supervisor; Rev. H. H. Dobbins, Berkeley; Miss Rosemary Dobbins, Berkeley; Mrs. C. A. Westenberg, Berkeley; Capt. C. W. Brooks, Dr. R. V. Tisdale, Miss Grace Graham, Miss Jessie Willard, Mrs. R. O. Moody, Town and Gown Club of Berkeley; Miss Mary Page, Berkeley; Miss Beatrice Wilmans, Dr. Lewis Michelson, Berkeley; Dr. and Mrs. C. H. Denman, Mrs. J. B. Hume, president of State Federation of Women's Clubs; Miss Blanche Morse, secretary of the State Federation of Women's Clubs; Mr. and Mrs. F. R. Hamilton, Dr. H. G.

Thomas, Dr. Edward Von Adelung, Dr. Ewer, Dr. C. W. Page, Dr. Frank Simpson, Dr. A. F. Gillihan, Dr. R. O. Moody, Dr. Frederick D'Evelyn, Alameda; Miss Louise Schmits, Associated Charities; J. K. McKenzie, Rev. Clifton Macon, A. K. Munson, Dr. Lemuel Adams, president Alameda County Medical Society.

SANTA ANA.

The Santa Ana *Daily Register*, Thursday evening, March 4, 1909, gave the following account of the meeting of organization of the recently formed Santa Ana Society, which started off with 150 members:

SANTA ANA SOCIETY TO CARRY ON FIGHT HERE AGAINST TUBERCULOSIS.

Pure Air, Good Food, Lots of Rest.

These Are the Main Essentials To Be Supplied Those With the Disease.

VISITING DOCTORS TELL OF CRUSADE.

Organization Everywhere Will Decrease Spread—Officers Are Elected.

Officers of the Santa Ana Society for the Study and Prevention of Tuberculosis:

President—J. N. Anderson.

First Vice-President—Dr. G. H. Dobson.

Second Vice-President—Dr. Wilella Howe-Waffle.

Third Vice-President—Mrs. F. P. Nicky.

Secretary—Dr. John Wehrly.

Treasurer—D. H. Thomas.

Directors—Mrs. Victor Montgomery, W. H. Wotton, Mrs. H. S. Gordon, A. J. Crookshank, Mrs. W. F. Lutz, Mrs. A. R. Rowley, Mrs. C. D. Ball, M. Reinhaus, J. A. Cranston and J. A. Hankey.

Committees—To be selected later.

Pure air, nutritious food and plenty of rest—in short, this is the prescrip-

tion for the treatment of tuberculosis. The preventive prescription is about the same and consists in following out right living.

Various phases of the work of the societies fighting the great white plague were taken up by the speakers at the meeting at the High School last night. The Santa Ana Society for the Study and Prevention of Tuberculosis, an auxiliary of the State Society, was formed, a constitution almost identical with the Los Angeles Society constitution was adopted, and officers were elected.

The meeting last night was called to order by Dr. Dryer, who stated that he had taken up the organization of an auxiliary here at the request of the board of directors of the State Society. The school board, board of health and public authorities had given assurance of co-operation. Dr. Ball was introduced as chairman for the evening.

The society started off with a membership of 140.

World-Wide Fight.

Dr. Ball spoke of the fight against tuberculosis as a world-wide movement, that physicians were leading the fight for the sake of humanity. Whether or not their efforts would be appreciated by the world at large remains to be seen. The physicians bested smallpox and got kicked for it; they rid diphtheria of its terrors and are called inhuman for it. Dr. Ball, in introducing Dr. George H. Kress of Los Angeles, stated that probably fifty per cent. of those present had been at some time infected with tuberculosis.

Dr. George H. Kress said that the organized attempt to overcome the disease was not a fad. Tuberculosis is intimately connected with the faults of living. It is not hereditary, but comes on after the individual is formed and the greatest havoc is played where the conditions for the physical well being are poorest.

Statistics prove the disease to be very prevalent and very curable when taken in time.

The stereopticon views were used. First was shown a graveyard with statistics to the effect that each year the new tuberculosis patients in the world number 1,500,000; in the United States, 180,000; in New York, 14,000; in California, 4000.

Takes the Best.

Comparisons were made showing that sufferers from the great white plague are taken off in the prime of life, and when it is known how easily it can be prevented, that many of those who die are virtually murdered, you will see the necessity of the crusade.

The germ is a plant. One patient will expectorate several billion germs per day. Intemperance, close rooms, overwork, poor sleeping quarters, smoke and dust and mouth breathing are chief factors in inducing the spread of tuberculosis. Looking for cure the patient should have a doctor, sunlight, outdoor air, good food and rest. A patient should be careful not to overexert himself. There is no need to ostracize a tubercular patient. Let the sputum be destroyed by burning or disinfection, let him keep clean and sleep alone, and he will not be dangerous to the family. The disease often does a person injury morally as well as physically.

Insanitary Conditions.

Pictures of dense smoke, crowded tenements, Mexican shacks, filthy alleys and sanitary garbage cans were shown. Such places can be found in every city of over 5000. Dr. Kress declared that alcohol in no way is a cure for the disease, but is a known detriment to the progress of the patient. He said that any child who is a habitual "mouth-breather" needs the attention of a physician at once.

Dr. Kress showed pictures of dairy cattle, and spoke of the danger from infected milk. He said the society

wants a law that will make the inspection of all dairy cattle compulsory.

By a chart the speaker showed how nature aids in the fight of the disease, segregating and surrounding germs. The work of cure is to bring the power to the system to fight and surround the poison in the system.

Dr. Browning of the Monrovia Sanitarium, gave an address along the lines of the necessities of organization in the fight against tuberculosis.

"While the disease is communicable, it is also curable and preventable. If it can be cultivated, it can likewise be thrown out like weeds from a garden, and an effort along that line is the purpose of the organizations now formed.

"Sunlight is the enemy of all infectious diseases. The direct rays of the sun in a few hours will kill the tubercular germ.

"It is a fact that nurses who handle tubercular patients day after day are remarkably free from the disease, due to care. That they are goes to prove what can be done by proper attention to the destruction of sputum. With the proper care, two generations should make tuberculosis as scarce as smallpox is now. The casual meeting of a patient is not dangerous. It is a house disease. Should California as a whole adopt the bungalow and tent plan in house building, I assure you it will be but a short time until the State will have only those patients who come from elsewhere. In California it is the comfortable home that needs watching as to ventilation, for often the home of the cholo is the better ventilated of the two.

"When organized you can have school inspection. Your City Council ought to help out in securing nurses. Help out your City Health Officer."

Dr. Browning urged organization here. He said that wherever there had been organization there was a noticeable decrease in the spread of the disease.

From a Minister.

Dr. Ball called upon Rev. W. H. Wotton to speak. Rev. Wotton said that the day when it was fashionable to be ill has gone by, and now the gospel of the day is the gospel of good health and vigor of body. Santa Ana, said he, has some places such as were pictured by Dr. Kress, and they need attention.

On Dr. Dryer's motion, the Santa Ana auxiliary was formed, to be known as the Santa Ana Society for the Study and Prevention of Tuberculosis, and on Dr. Gordon's motion the Los Angeles constitution was accepted as the constitution of the society. Drs. Burlew and Dryer and Supervisor H. E. Smith were named as a nominating committee. On the committee's report, officers were elected, and J. N. Anderson, the new president, took the chair. He announced a meeting of the executive committee for next Wednesday night at 7:30 o'clock, at the High School, and the meeting adjourned.

SACRAMENTO.

From a leaflet issued by the White Crusaders of Sacramento, we clip the following, Dr. Briggs and Mr. Bounheim having promised a more extended review later on:

"The purposes of the White Crusaders are purely humanitarian. They are limited by no creed, race or condition of mankind. They are, briefly, the study, prevention, mitigation and cure of tuberculosis, the greatest human scourge of this or any other age, the great white plague which the world over claims a victim every thirty seconds—in the aggregate approximately a million victims a year. The work is to be done through popular education, preventatoriums, dispensaries, camps, nurseries, sanatoriums, schools and hospitals. The means for this work are to be derived from donations, subscriptions, bequests, dues and royalties."

SIERRA MADRE.

The Sierra Madre correspondent to the Los Angeles *Times* of March 2nd, printed the appended notice concerning the formation of the new society at that place:

Dr. George H. Kress addressed a meeting at the Town Hall last night upon the advisability of forming a local association for the study and prevention of tuberculosis. Mayor Jones presided. Dr. Kress spoke of the work of the State Association and of the different branches located at San Francisco, Los Angeles, Redlands and San Diego. Here in California concerted action and a careful study for the prevention and cure of this dreadful disease were, perhaps, more keenly needed than in the Northern or Eastern States. The appalling fact that during the last four years more deaths were caused by tuberculosis in the United States than were due to the great Civil War of 1861-65, should convince people of the urgent need of intelligent action along the lines of prevention and cure.

General education is to be a prominent feature of the association's enterprise, and it is calculated to help the public to keep healthy if possible, and to intelligently combat the disease if it must.

An organization was effected with these officers: E. W. Camp, President; Dr. R. H. Mackerras, First Vice-President; Mrs. C. H. Baker, Second Vice-President; Lieut. C. B. Street, Secretary and Treasurer; Mmes. L. C. Torrance, George H. Letteau, M. B. Brownson, Rev. Dr. James M. Campbell, Rev. Father Barth, A. N. Adams, Charles J. Fox, C. H. Perry, George B. Morgridge and George Humphries, directors.

PASADENA.

The Secretary of the Pasadena Society, Dr. E. H. McMillan, has sent us the copy of the minutes of the first meetings of that organization which may be of value to others in showing

how a society may be easily formed. The meeting was held February 22.

* * *

A meeting was convened at the Shakespeare Club House for the discussion of the tuberculosis problem and for the organization of the Pasadena Society for the Study and Prevention of Tuberculosis.

The meeting was called to order by Dr. F. C. E. Mattison, who briefly reviewed the object and methods of the State and other local societies and the necessity for the organization of a branch in Pasadena. Dr. McMillan was asked to act as Secretary. He was followed by Dr. George H. Kress of Los Angeles, who gave an interesting lecture illustrated by stereopticon views. Others who joined in the discussion were: Dr. Norman Bridge, Dr. Chas. Lee King, Dr. Stehman and Dr. Sherry. Dr. Lockwood then moved the adoption of the following resolutions:

"Whereas, The prevention and relief of tuberculosis is a public health problem which faces every community in Southern California, and,

"Whereas, We are met together this evening for the purpose of considering ways and means whereby indigent consumptives of Pasadena may be aided in their fight for health as well as to promote all efforts intending to prevent the spread of this disease; now,

"Therefore, Be it resolved that it is the sense of this meeting that these objects can be best attained by forming a society for that purpose, and that we herewith form such an organization to be known as the Pasadena Society for the Study and Prevention of Tuberculosis, and

"Be It Further Resolved, That the constitution and by-laws of the Los Angeles Society for the Study and Prevention of Tuberculosis, as printed on pages eight to eleven of the State Tuberculosis Bulletin of January, 1909, be adopted as the constitution and by-laws of the Pasadena Society, the word Pas-

adena being substituted for the word Los Angeles wherever such change is necessary."

These resolutions being adopted, Dr. Lockwood further moved that the chair appoint a nominating committee of three persons to bring in nominations for president, three vice-presidents, a secretary, a treasurer and ten other members of the board of directors, the above sixteen directors to complete the organization of the board by the election of nine additional members as provided for in the by-laws.

The nominating committee appointed by the president were: Dr. Stehman, Dr. McBride and Dr. Black.

The following officers were nominated: President, Dr. Sherry; First Vice-President, S. Hazard Halsted; Second Vice-President, Mrs. Fordyce Grinnell; Third Vice-President, Dr. Charles Lee King; Secretary, Dr. E. H. McMillan; Treasurer, Mr. Gosney. Additional Directors, Dr. Norman Bridge, Dr. S. P. Black, Mr. C. B. Scoville, Dr. Condit, Mrs. W. F. Knight, Mrs. Leroy Jepson, Mrs. Mitchell, Mrs. W. D. Turner, Mrs. Calvin Hartwell.

A motion was made and carried that the Secretary cast the ballot for these nominees. Carried.

On the motion of Dr. King the meeting adjourned to be convened again at the call of the president.

Minutes of the second meeting of the Pasadena Society for the Study and Prevention of Tuberculosis held at the Board of Trade rooms, March 11th, 1909.

* * *

The minutes of the meeting at the Shakespeare Club House, February 22nd, 1909, were read and approved. Two communications from Mr. S. Hazard Halsted were then presented in which he tendered his resignation as First Vice-President of the society, and on motion of Mrs. Calvin Hartwell, seconded by Dr. King, his resignation was accepted. Mrs. Hartwell then

moved that Dr. Charles King be elected First Vice-President, the motion being unanimously carried. Dr. King being elected to the office of First Vice-President, resigned his position as Third Vice-President, and Mr. C. B. Scoville was elected to fill this vacancy.

The next order of business was the election of additional directors to complete the Board of Directors, the directors elected being:

Dr. Garrett Newkirk, Dr. Ernest Hoag, Dr. S. J. Mattison, Mrs. C. J. Willett, Mr. W. C. Baker, Mrs. Crews, Miss Alden, Dr. F. C. E. Mattison, Mr. J. D. Mersereau, Miss Abbott, Miss Atwood.

The president then appointed the standing committees of the society as follows:

No. 1—Finance Committee—C. B. Scoville, W. C. Baker, J. D. Mersereau.

No. 2—Membership Committee—Mrs. W. D. Turner, Dr. Garrett Newkirk, Mrs. Fordyce Grinnell, Miss Abbott.

No. 3—Press and Publicity Committee—Dr. F. C. E. Mattison, Mrs. W. F. Knight, Mrs. Crews.

No. 4—Legislative and Law Enforcement Committee—Mrs. Calvin Hartwell, Dr. S. P. Black, Dr. F. C. E. Mattison.

No. 5—Literature and Publication Committee—Dr. E. B. Hoag, Mrs. C. J. Willett, Mrs. Revel English, Miss Atwood.

No. 6—Hospital and Dispensary Committee—Mrs. Lewis H. Mitchell, Dr. J. D. Condit, Dr. S. J. Mattison.

No. 7—Consulting Medical Committee—Dr. S. P. Black, Dr. Chas. Lee King, Dr. F. C. E. Mattison.

No. 8—Lectures and Public Meetings Committee—Dr. Chas. Lee King, Dr. Norman Bridge, Miss Alden.

* * *

Of interest also, is the following item, concerning which Dr. Stehman has promised to write us for our next issue:

HEALTH HOME IN A CANYON.

Presbyterians Sell Site for Large Sum.

Pasadena, Feb. 21.—It is stated that Millard's Canyon and adjacent property, formerly owned by the Presbyterian Chautauqua Association and purchased yesterday by a group of Pasadena philanthropists, is to be given over as a health camp for destitute consumptives.

Dr. H. B. Stehman, who is one of the leaders where tuberculosis charities are concerned, is in charge of the deal and could not be reached last night to state the intention of his companions in the enterprise.

The property purchased consists of 280 acres of semi-mountain land and includes practically the entire Millard Canyon. The price paid the Presbyterian organization is said to be about \$30,000.

It was the plan of the church to make the place into a chautauqua site and there entertain students during the summer months. This has been abandoned.

The health camp which was located in Linda Vista caused trouble there and it was decided to find a new site.

If the change is made to Millard Canyon it will prove a satisfactory solution to the question.

LONG BEACH.

On the evening of February 25, a meeting of the citizens of Long Beach was called at the Y. M. C. A. building for the purpose of forming an anti-tuberculosis society. The meeting was held under the auspices of the Y. W. C. A. lecture course, Dr. F. L. Rogers and Mrs. Emma Greenleaf having had charge of the work preliminary to organization.

Dr. F. L. Rogers stated the object of the meeting, and Dr. George H. Kress, Secretary of the State Tuberculosis Association, gave a stereopticon lecture on tuberculosis, its causes, prevention and cure.

Dr. Fitch Mattison of Pasadena made a plea for action, on the ground of its being a public health duty of every citizen to lend his aid in this fight against a preventable disease.

On motion a resolution to organize and to adopt as the constitution and by-laws, those of the Los Angeles Society, was carried.

**A CONCRETE EXAMPLE OF THE
NEED OF AN ANTI-TUBERCU-
LOSIS ASSOCIATION IN
EVERY COMMUNITY.**

The following interesting letter was referred to us by the Mr. Jacobs of the National Association and the reply of the correspondent to our own letter was appended. The first letter speaks volumes for the need of State and District Associations against tuberculosis:

* * *

LOS GATOS, CAL.,
Sept. 20, 1908.

Mr. Philip P. Jacobs, Assistant Secretary National Association for the Study and Prevention of Tuberculosis, New York City:

DEAR SIR:—A press dispatch in morning papers mention an extensive report to be issued by your society and states that it was compiled by yourself. In this manner we obtained your address. We are writing for you to assist us, and would request any circulars or printed matter you may have for distribution. Los Gatos is a beautiful village about sixty miles south of San Francisco, and many persons afflicted with tuberculosis are sent here. The landlords rent and re-rent the little cottages without ever cleaning or fumigating the premises. Last year, one party, a young girl, died; the house, fully furnished, was then occupied by a young man in the last stages of consumption. He was removed at night in an ambulance and died at his home in Oakland one week later. Then this summer a family of mother and six little

children were tenants. The house was never cleaned in any manner—even swept out—when this family were rented the house. They lived three months—spent the summer—and no one made them any the wiser of the danger they run. The house is now again to rent. And I have started to educate the people to the great menace that hovers over the town. The Board of Trade, at my request, will discuss the question at their meeting in October. I want help in the form of printed matter. I want the town authorities to pass an ordinance requiring all houses to be cleaned and fumigated where persons have lived who have tuberculosis. Can you assist me? Or who will?

Yours truly.

* * *

LOS GATOS, CAL.,
March 4, 1909.

*Dr. Geo. H. Kress, 602 Johnson Bldg.,
Los Angeles, Cal.:*

DEAR SIR:—Your letter of the 1st to hand. At present I am busy with a May Day celebration, but as soon as I get a chance, I will organize a society. I will notify you of our action. We have a good field here, as this is a health resort for cases of tuberculosis.

Yours truly.

Are you an annual member of the State Association, and if so

**Have you paid your
Membership Dues for 1909?
If not, will you not
kindly send check for \$1.00
to the secretary,**

**Dr. George H. Kress, 240 Bradbury
Building, Los Angeles, Cal.**

For until California is educated concerning the tuberculosis problem, the work of education and organization, must be carried on largely through private effort and subscriptions. Your membership fee will help in distributing literature, advice and aid to those who sadly need it, as well as give an impetus to the formation of new centers of anti-tuberculosis activity. Lend a hand.

A NOTICE TO THE EAST.

The Los Angeles *Evening Express*, March 16th, contains an article regarding penniless consumptives from the East, which is worthy of wide publicity. It is as follows:

PENNILESS SICK WILL BE BARRED.

Decision Is Announced That Los Angeles Shall Not Receive Indigent Consumptives From Other Eastern States.

ACTION IS TAKEN AT CHARITY CONFERENCE.

Many Representatives of Organization Discuss Situation—Conclusion Reached Is Unanimous—Resolution Adopted.

No more penniless consumptives will be received in Los Angeles county from Eastern States.

Representatives of all the charitable organizations and institutions in Los Angeles county, assembled in general conference in the Chamber of Commerce today, voted to put up the bars.

Formal notice was also served on charitable organizations and physicians all over the United States that indigents in advanced stages of tuberculosis, if shipped to Los Angeles county, will be promptly sent back to the points from which they came.

"We have nothing to say about people who are able to support themselves coming here with the disease," said H. W. Frank, who introduced the resolution, "but we object to other communities sending us sufferers who are penniless and dying. Ohio, for instance, would have no right to declare that it would abolish its prisons and send all criminals to California in the future."

A long and spirited discussion followed the introduction of the resolution. From the moment of its introduction the sentiment for it seemed to be unanimous.

About fifty representatives of charitable societies in the county were pres-

ent at the conference which was called to consider and discuss a number of questions relating to charity.

The action with reference to consumptives from other States was by far the most important taken by the conference.

"There is nothing heartless or selfish about the action proposed," said Dr. George H. Kress, who presided. "The treatment of tuberculosis in recent years has demonstrated that it can be cured as easily and as quickly in the Eastern States as it can in Southern California. In fact, in the advanced stages the patient stands a much better chance at home, among his friends and surrounded by home comforts, than he does in a strange land among strangers, where he is very often short of funds and compelled to endure hardships that come from poverty.

"I think that the majority of people who are sent here in the last stages of the disease come without sufficient funds to care for them properly. Sooner or later they are bound to become charges upon the county, and it is, therefore, a question whether this community shall be obliged to bear the burden of caring for the consumptives of the entire country. We must protect ourselves and this seems the only thing we can do.

"Only yesterday there came to my personal attention the case of a man suffering from tuberculosis, who arrived here two days ago from one of our Southern States. His disease was of such a nature that its progress was slow and his chances of recovery in his former home were excellent. His wife and two children were with him. He is not able to work, and the day after they arrived in the city their total capital consisted of \$1. The family became a burden on the county almost from the instant of its arrival."

The resolution, which was unanimously adopted, is as follows:

"The charity conference of Los Angeles, in assembled session, this day sends greeting to kindred organizations in Middle West, Eastern and Southern States, and requests, in the name of charity and humanity, that organized charities and physicians should not persist in sending patients in the advanced stages of tuberculosis to Los Angeles, only to cause suffering to the indigent and a burden to the communities on which such patients have no claim. If this practice be continued, this conference gives notice that it will be obliged promptly to return such indigents to the places from which they were sent."

In connection with the above the following letter and clipping from Dr. J. W. Pettit, President of the Illinois State Medical Society and Medical Director of the Ottawa Tent Colony, is of interest:

"March 19, 1909.

"Dr. George H. Kress, Los Angeles, California.

"MY DEAR DOCTOR: Notice of resolutions passed by your Society and which were published throughout the country are met in the same spirit in which I assured you they would be, as evidenced by the editorial from the *Chicago Evening Post*, which I enclose.

"You have done the right thing in the right way, and you will soon begin to notice results. With your societies at that end of the line, and we at this, discouraging the impecunious invalid from going west, I think we will accomplish great results.

Yours truly,
"J. W. PETTIT."

BARRING THE CONSUMPTIVE.

Thanks to our country-wide "stay-at-home-and-be-cured campaign," Los Angeles will escape most of the blistering criticism which it would have received a few years ago for its decision to admit no more penniless consumptives. The country has learned that those in-

fectured with tuberculosis are far better off at home, sleeping out of doors, in touch with their families, with, perhaps, some slight employment available, than they would be starving to death in Southern California.

Climate counts for something in the cure of tuberculosis, but plenty of good food and rest count for more. The medical profession, which got in the habit of ordering indigent patients to California, would have stopped long ago had its members seen the pathetic struggles for existence which are witnessed in every southwestern city, town and village—the stream of "lungers" canvassing anxiously for "light work."

It is to the immense credit of the people of the Southwest that they have so long accommodated their institutions and even some of their industries to the needs of these more or less helpless pilgrims from the East. They have done about everything that humanity could ask, and now that nearly all those industrial states which are most afflicted with tuberculosis are rapidly making provisions, through dispensaries and sanatoriums, to care for their own patients, it is time that this hopeless emigration stopped.—*Editorial, The Chicago Evening Post, Thursday, March 18, 1909.*

COMPULSORY REGISTRATION BILL VETOED.

Dr. René Bine of San Francisco has sent us the following note:

"I think it might be of interest to the readers of the *BULLETIN* to inform them that Senate Bill No. 59 (the Compulsory Registration and Immigration Bill), which passed the Senate and Assembly after having overcome considerable opposition in those bodies, was finally vetoed by the Governor for reasons which he gave to the Senate on March 17, and published in the Senate Journal of that date. I will try to send you later a copy of the bill and the reasons for veto."

LOS ANGELES DEATH RATES FOR THE LAST FIFTEEN YEARS.

Through the courtesy of Mr. H. Sief, Mortuary Clerk of the L. A. Health Department, we are able to publish the

following interesting tables giving some very important information, on the vital statistics of Los Angeles:

MISCELLANEOUS DISEASES.

Year	Estimated Population	Total Deaths from All Causes	Death Rate Per 1000	Deaths from Tuberculosis	Death Rate Per 1000	Deaths from Heart Diseases	Death Rate per 1000	Deaths from Influenza	Death rate per 1000	Deaths from Nervous Diseases	Death rate per 1000	Deaths from Diseases of the Kidneys	Death Rate per 1000
1892.....	65,000	945	14.38	204	3.15	76	1.17	0	...	19	0.29	52	0.81
1893.....	65,000	954	14.67	256	3.93	81	1.24	5	0.07	61	0.93	38	0.58
1894.....	65,000	1182	18.16	277	4.10	85	1.30	21	0.32	130	2.00	40	0.61
1895.....	75,000	1176	15.68	300	4.00	95	1.26	12	0.16	89	1.18	61	0.81
1896.....	100,000	1366	13.66	328	3.28	104	1.04	9	0.09	73	0.73	78	0.78
1897.....	100,000	1412	14.12	357	3.57	148	1.48	12	0.15	144	1.44	78	0.78
1898.....	103,000	1601	15.54	335	3.25	181	1.75	12	0.11	213	2.06	102	0.99
1899.....	103,000	1641	15.93	357	3.46	143	1.38	19	0.18	131	1.26	113	1.09
1900.....	103,000	1729	16.78	392	3.80	150	1.45	11	0.10	113	1.09	111	1.07
1901.....	103,000	1929	18.72	429	4.16	168	1.64	29	0.28	169	1.64	162	1.57
1902.....	120,000	2290	19.08	487	4.58	207	1.72	5	0.04	234	1.95	149	1.24
1903.....	135,000	2628	19.46	575	4.21	265	1.96	8	0.06	256	1.89	167	1.24
1904.....	180,000	2981	16.56	651	3.61	263	1.46	12	0.06	266	1.47	153	0.85
1905.....	200,000	3104	15.52	666	3.33	306	1.53	23	0.12	273	1.37	184	0.92
1906.....	250,000	3740	14.96	734	2.93	382	1.52	5	0.02	378	1.51	244	0.90
1907.....	250,000	4083	16.33	778	3.11	461	1.84	12	0.05	459	1.83	260	1.04

TUBERCULOSIS.

Year	Estimated Population	Total Deaths from all Causes	Deaths from Tuberculosis	December	January	February	March	April	May	June	July	August	September	October	November	Death Rate per 1000
1892.....	65,000	945	204	22	25	23	16	26	9	9	19	15	8	16	16	3.15
1893.....	65,000	954	256	20	21	20	34	29	16	17	17	20	16	23	23	3.93
1894.....	65,000	1182	277	23	23	26	35	25	26	19	10	20	18	24	19	4.10
1895.....	75,000	1176	300	25	21	24	28	28	24	29	25	20	16	27	33	4.00
1896.....	100,000	1366	328	29	24	35	30	42	24	19	22	26	23	31	23	3.28
1897.....	100,000	1412	357	23	41	25	56	31	26	23	25	24	23	22	38	3.57
1898.....	103,000	1601	335	32	23	27	31	32	28	29	26	32	16	28	31	3.25
1899.....	103,000	1641	357	39	41	44	40	27	24	23	27	15	28	25	24	3.46
1900.....	103,000	1729	392	32	45	33	44	32	37	32	27	20	26	32	32	3.80
1901.....	103,000	1929	429	36	45	37	46	38	34	29	38	30	37	30	29	4.16
1902.....	120,000	2290	487	40	57	56	57	49	28	28	36	32	24	45	35	4.58
1903.....	135,000	2628	575	53	68	47	55	49	50	39	44	43	40	36	51	4.21
1904.....	180,000	2981	651	68	64	66	69	63	51	47	40	39	41	48	55	3.61
1905.....	200,000	3104	666	57	72	70	66	62	58	50	47	40	40	49	55	3.33
1906.....	250,000	3740	734	76	73	62	69	62	69	61	56	53	36	48	69	2.93
1907.....	250,000	4083	778	70	85	80	86	66	64	56	49	60	48	52	62	3.11

THE WARFARE AGAINST TUBERCULOSIS AND THE RELATION OF TEACHERS THERETO.*

BY GEORGE H. KRESS, M.D., LOS ANGELES, CAL.

Why a World Warfare Is Being Waged Against Tuberculosis.

Pulmonary tuberculosis, known also by the names of consumption and the great white plague, is responsible for one out of every five to ten deaths.

It has been estimated that the world annually offers up more than one million lives to this disease, two deaths occurring every minute.

In the United States, the death roll from tuberculosis every year means the loss of more than 150,000 citizens.

Most of these deaths (about 90 per cent) are adults. The economic loss represented by these deaths means an annual deficit to this country of more than three hundred million dollars. In addition to this vast loss of money to the nation, there is the suffering endured by the victims of the disease and the sorrow of bereaved and often of dependent families.

All this vast amount of death, treasure, suffering and sorrow is occasioned by a disease that can be prevented. The deaths of these citizens and all the loss that goes therewith are therefore altogether and entirely unnecessary!

Is it any wonder then, that the civilized world has at last awakened to its responsibilities in this almost greatest of all public health problems, and is determined to exterminate this widespread and unnecessary disease?

*This "Leaflet for Teachers" was entered under the name "The Teacher an Important Factor" in the competitive exhibit at the International Tuberculosis Congress at Washington (Sept. 21st to Oct. 12th, 1908) and was awarded the silver medal.

The basic facts essential to prevention and cure have been discovered. The task before the world is the application of this knowledge. The call to arms for battle with this great scourge has gone forth to all civilized nations and peoples.

The members of the teaching profession will have an almost sacred part to bear in that warfare.

The Important Role of Teachers in the Warfare Against Tuberculosis.

Teachers will have a tremendous influence in the fight against tuberculosis, because the successful eradication of the disease will depend in good part upon the extent to which the rising generation of citizens are taught concerning its prevention and cure.

What Is Tuberculosis?

Tuberculosis is a disease usually affecting the lungs (although bones, glands and other tissues are not infrequently attacked), and which runs most often a slow course of weeks, months or years, being characterized by cough and other pulmonary symptoms with gradual loss of weight and strength and the presence of certain constitutional symptoms.

The Causes of Tuberculosis.

In 1882, Robert Koch of Germany proved that tuberculosis belonged to the class of germ or infectious diseases by discovering the particular or specific germ that must always be present in the body afflicted with this disease. This germ because of its rod-shape is called the bacillus tuberculosis.

Since then has been proven, also, that the predisposition to the disease exists in those persons whose health for any reason is below normal. In other words, the old idea that tuberculosis was hereditary has been shown to be an error. The most that can be inherited

is the predisposition, namely, a weakened body, and a weakened body is far more often acquired than inherited.

The Specific Cause of Tuberculosis—

A Germ.

The specific or exciting cause of the disease is the micro-organism or germ or bacterium known by the name of the bacillus of tuberculosis. This bacillus is so small that ten thousand placed end to end make only a single linear inch.

Like other bacteria, it is a member of the plant kingdom. This particular germ belongs to the class of parasitic plants. In common with other plants it grows best in soils adapted to its needs. The soil it seems to prefer above all others is the lung tissue of a person whose health or resistance is below par.

The bacillus of tuberculosis is spread broadcast because a single consumptive can cough up in twenty-four hours sputum containing not millions but actually several billions of germs. Under present conditions the care of this sputum is often neglected and as it dries into dust, the germs are blown hither and thither to contaminate not only the air that is breathed but to get on things that are handled or eaten.

Types of this germ are also found among certain of the lower animals, where they also produce forms of pulmonary tuberculosis. Those found in dairy cows are particularly a menace, since milk is a good medium of transmission.

Predisposing Cause of Tuberculosis—

A Weakened Body.

Through the discovery of the bacillus of tuberculosis and the elimination of the theory of hereditary transmission must disappear also much of the fatalism with which tuberculosis has been accepted by many persons.

The general groups into which the predisposing causes fall may be said to be bodily weakness or lack of resistance resulting either from hereditary enfeeblement, over-work, under-feeding, previous diseases, vicious habits, over-crowding or general unhygienic mode of living.

Many infants are born weak. Unless such children can be developed physically, they are apt to give but feeble resistance to disease.

Overwork, mental or physical, whether from necessity or from choice, through the bodily fatigue and weakness induced, is responsible for many infections from tuberculosis. Certain occupations also, like those with irritating dusts, frequent temperature variations, confined positions and so on favor the production of bodily or pulmonary weakness.

Under-feeding, whether from insufficient or improper foods, is another factor responsible for much bodily weakness.

Previous diseases—and particularly in childhood, measles and whooping-cough, and later in life, grippé—often induce a lack of resistance, which through neglect, or in adult persons by too early return to work, place such persons in excellent receptive condition for infection.

Vicious habits, particularly over-indulgence in alcoholic drinks, to the neglect of good food, often results in lowered health and predisposition to tuberculosis.

Over-crowding is a far too frequent cause in the production of weakened bodies. Workshops, schoolrooms, and homes seem often to be constructed to keep air out rather than to let it in. In many rooms, persons are crowded into a limited air-space with almost utter disregard to ventilation. To breathe vitiated air is at all times harmful. An impression prevails also that night air is harmful and that open windows at

night are dangerous. This is the contrary of the actual facts. Outside night air is almost invariably more pure than that of a closed room in which the oxygen is being consumed by human beings, lamps or gas.

The Changes Produced in the Lungs by the Germ.

The bacillus tuberculosis is a parasitic plant which in pulmonary tuberculosis feeds on the lung tissues. At the same time it casts off substances which not only lessen resistance locally, but which, when they get into the blood and circulation, are largely responsible for the symptoms of the disease.

When the germs get into healthy lungs, even though they gain a foothold, they are usually overcome by the tissue cells and fluids.

But when the germs get into the lungs of persons whose health or resistance is below normal, the germs often gain the victory. The elementary change produced in the lung tissue is a little nodule about the size of a pin's head called a tubercle. This tubercle can break down into an ulcer or small abscess. If many such be near together, a cavity may be formed.

In healing or cure the tubercles, ulcers and abscesses are replaced in whole or in part by ordinary scar tissue, such as that by which wounds on the surface of the body are repaired.

The Symptoms of Tuberculosis.

The difficulty of early recognition, combined with the mildness of the discomfort in the early stages, are the factors largely responsible for neglect of this disease by its victims, until a time often so late as to not give much real chance for recovery.

In the beginning all that may be evident is a tired feeling or a tendency to fatigue after work, some variation in appetite, some slight loss of weight and an irregular cough of somewhat obstinate character.

Later on, the loss of weight and cough may be increased, much sputum may be expectorated, fever may be noted, night sweats may occur, and there is increasing weakness.

Still later may be shortness of breath, with accentuation of the above symptoms and with or without hemorrhage or other complications. In this third stage is met the typical emaciated, weakened, coughing consumptive.

The Two Fundamental Facts in the Prevention of Tuberculosis.

These are two, being dependent upon the two causative factors.

The first implies the destruction of the germ.

The second implies the strengthening of the weakened body.

The Destruction of the Bacillus of Tuberculosis.

Most consumptives acquired the disease from other consumptives and this because the latter failed to destroy their sputum, for it is through the sputum of consumptives that tuberculosis is almost exclusively spread.

The problem of destroying the germ almost narrows itself down, therefore, into destroying all sputum.

This is accomplished by having the patients expectorate into paper spit-cups or napkins that can be burned, or into pocket spit-cups that can be easily disinfected, or into spittoons containing solutions like lye or carbolic acid (five per cent), which kill the germ.

Consumptives should avoid coughing or speaking into other people's faces; should have separate eating utensils which are boiled after use; should wear no beards; should bathe hands frequently, especially before eating; and should sleep in separate beds and rooms.

The bed and personal clothing and the rooms occupied by such persons should be sunned and aired as much as possible, for fresh air and sunlight will kill in a few hours the germs that live

for months in damp, dark places. Because the germs live longest under such conditions, tuberculosis has also been called a house and a filth disease. Rooms of consumptives should also, when convenient, be fumigated from time to time by formaldehyde or other method.

Regarding infection through milk, it is hoped the time will soon come when all dairy herds will be free from tuberculous cattle.

The Development of the Resistance of the Body.

The elimination of the accessory or predisposing cause is accomplished by building up the bodily health.

The causes of physical weakness or retrogression were discussed in a previous paragraph and their eradication at the same time indicated.

In a few words, the proposition is to have all such persons breathe pure air only and constantly, every hour in the twenty-four; to eat slowly nutritious foodstuffs; and to obtain all the rest and sleep needed, with just enough bodily exercise to keep the body in good tone.

These are simple rules, but because they are in opposition to the present mode of living of many people, are extremely difficult of adoption. Teachers by word and practice in schoolroom can inculcate these truths with lasting effect on their pupils.

The Cure of Tuberculosis.

There is no medicinal or climatic specific or cure for tuberculosis. The basis of modern treatment, and that which is

responsible for most of the healing and cures is what is known as the hygienic-dietetic treatment. This is nothing more than the mode of life just mentioned. It can be carried out anywhere. Home climate with comforts and contentment is always superior to far-away climates with straitened circumstances and homesickness.

Tuberculosis is healed or cured by making the blood and tissues richer and stronger. This enables them to resist and often overcome the germs and to repair the damage which has been done.

The tuberculous patient, however, needs supervision by a physician who has made a study of the disease. Complications are constantly arising and the hygienic treatment is not as simply carried out in practice as it is expressed in words. Every consumptive, therefore, should be under the care of a private or dispensary or hospital physician. If he can enter a sanatorium (place of healing) his chances of cure will be increased.

Sure cures in the way of patent medicines, and especially cough medicines containing alcohol or opiates, are dangerous. Valuable time is lost by such temporizing.

Pure air, good food, sufficient rest, a hopeful temperament and supervision by a competent physician—these are the elements that make for cure, just as they are also potent forces for prevention.

In spreading the knowledge of these truths teachers can be of inestimable service in this great struggle.

"THE TEACHER AN IMPORTANT FACTOR."

Join the California Association.

Do It Now.

The State needs your Co-operation.

HOW THE GERMS OF CONSUMPTION ARE CARRIED FROM THE SICK TO THE WELL



CONSUMPTIVE SPITTING ON FLOOR.
FLIES FEEDING ON IT, CARRY THE
GERMS OF THE DISEASE TO FOOD.



THE SPIT DRIES AND CARELESS
SWEEPING, DUSTING OR DRAUGHTS
CAUSE THE GERMS TO FLOAT IN THE AIR.



THE GERMS MAY ENTER
THE BODIES OF CHILDREN
PLAYING ON THE FLOOR,
THROUGH SORES OR WOUNDS.



OTHERS MAY GET THE DISEASE BY BREATHING
OR SWALLOWING THE GERMS.
SPRAY GIVEN OFF IN SNEEZING OR COUGHING,
CONTAINS GERMS IN A MOST ACTIVE STATE.



PUTTING FOOD, MONEY, PENCILS, ETC.,
INTO THE MOUTH AFTER A CONSUMPTIVE
HAS POISONED THEM WITH HIS SPIT.

NEW YORK STATE DEPARTMENT OF HEALTH.

CONSUMPTIONS ALLIES—AVOID THEM AND YOU ARE SAFEGUARDING AGAINST THE DISEASE



INTEMPERANCE AND
OTHER EXCESSES.



THE CLOSED WINDOW.



OVERWORK.



CROWDED SLEEPING
LIVING AND WORKING ROOMS.



SMOKE AND DUST.



MOUTH BREATHING
OFTEN DUE TO ADENOID.

NEW YORK STATE DEPARTMENT OF HEALTH.

IN CASE OF CONSUMPTION, LOOK TO THESE FOR CURE



THE DOCTOR.



SUNLIGHT.



OUT-DOOR AIR.



GOOD FOOD.



REST.

NEW YORK STATE DEPARTMENT OF HEALTH

A CAREFUL CONSUMPTIVE.—NOT DANGEROUS TO LIVE WITH.



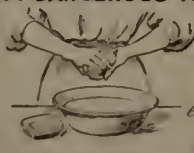
COUGHS, SPITS AND
SNEEZES INTO
PAPER OR CLOTH,—



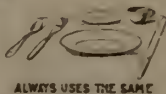
BURNS OR BOILS IT
BEFORE IT DRIES,—



OR PUTS IT INTO
A DISINFECTANT,—



WASHES HER HANDS
BEFORE AND AFTER EATING—



ALWAYS USES THE SAME
DISHES AND BOILS THEM
IN WATER BEFORE WASHING
WITH OTHER DISHES,—

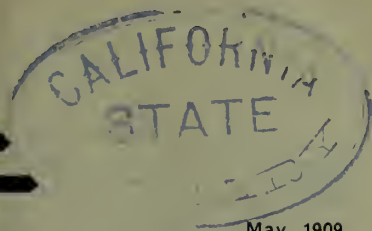


AND SLEEPS ALONE

(NEW YORK STATE DEPARTMENT OF HEALTH)

Banner used in the New York State Department of Health Traveling Exhibit and shown at the International Congress on Tuberculosis

Designed under the direction of Herbert D. Piase, M.D., by C. W. Fetherolf



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May, 1909.

The Bulletin

OF THE

California Association for the Study and Prevention of Tuberculosis

A BI-MONTHLY PUBLICATION

George H. Kress, M.D., Editor.

(Entered as second-class matter at the Postoffice at Sierra Madre, Los Angeles County, California.

The aim of this publication is to promote the study and dissemination of knowledge concerning the prevention and cure of tuberculosis, to aid in the establishment of institutions intended for those purposes, and to co-operate with such organizations as can render aid in the solution of the tuberculosis problem.

This Bulletin appears in January, March, May, July, September, and November.

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Editorial Board consists of Dr. George H. Kress, Editor, Los Angeles; Dr. George H. Evans, San Francisco; Dr. Gayle G. Moseley, Redlands; Miss Annis Coffey, Sierra Madre, and Miss Gertrude Tucker, Sierra Madre.

Editorial contributions may be sent to the office of publication, care of Miss Gertrude Tucker, Manager, P.O. Box 141, Suffolk Ave. and Sierra Madre Place, Sierra Madre, Cal.

Notice Regarding Copy.—The Secretaries of local societies are expected to send reports of the work of their organizations to the Editor, Dr. George H. Kress, 240 Bradbury Building, Los Angeles, without further notice. Officers and members of the state and local societies are urged to forward communications that seem to them to be of interest and if means allow, the same will be published.

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DIRECTORY.

International Tuberculosis Association

President.....Dr. Lawrence F. Flick, Philadelphia, Pa., U.S.A.
 First Vice-President.....Dr. Robert Koch, Berlin, Germany
 Second Vice-President.....Dr. L. Landouzy, Paris, France
 Third Vice-President.....Dr. Theodore Williams, London, England
 Secretary-General.....Dr. G. Pannwitz, Berlin, Germany.

National (U. S. A.) Association for the Study and Prevention of Tuberculosis

President.....Dr. Vincent Y. Bowditch	Vice-President.....Dr. Charles L. Minor
Hon. Vice-Pres. Hon. Theodore Roosevelt	Treasurer.....Gen. George M. Sternberg
Hon. Vice-Pres. Dr. Wm. Osler	Secretary.....Dr. Henry Barton Jacobs
Vice-President.....Mr. Homer Folks	Exec. Sec'y.....Dr. Livingston Farrand
	105 E. 22nd St., N. Y.

California Association for the Study and Prevention of Tuberculosis

President.....Dr. Fitch C. E. Mattison Pasadena, Cal.	Treasurer.....Mr. Charles H. Toll Los Angeles
First Vice-Pres...Dr. Edward von Adelung Oakland, Cal.	Secretary and Editor of the Bulletin.....Dr. George H. Kress 240 Bradbury Bldg., Los Angeles
Second Vice-Pres. Dr. John Driver Santa Ana, Cal.	

Local Affiliated Associations in California

(Arranged alphabetically)

Alameda County Society for the Study and Prevention of Tuberculosis

President.....Dr. Edward Von Adelung	Secretary.....Miss Mary Page, Berkeley
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Long Beach Society for the Study and Prevention of Tuberculosis

President.....Mrs. Emma Greenleaf	Secretary.....Dr. F. L. Rogers.
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Los Angeles Society for the Study and Prevention of Tuberculosis

President.....Dr. George L. Cole	Treasurer.....Mrs. Berthold Baruch
First Vice-Pres...Edwin T. Earl	Executive Committee—President, Secre-
Second Vice-Pres. A. L. Stetson	tary, Treasurer, Joseph Scott, Philip
Secretary.....Dr. George H. Kress	Forve, Dr. W. Jarvis Barlow, W. Le
	Moyné Willis.

Monrovia (Visiting Nurses' Association)

President.....Mrs. John H. Bartel	Secretary.....Mrs. W. Judson Smith
Vice-President, Mrs. M. L. Butts	Treasurer.....Mrs. J. J. Renaker
Vice-President, Mrs. Hardy Harris	

Pasadena Society for the Study and Prevention of Tuberculosis

President.....Dr. Henry Sherry	Third Vice-Pres...Mr. C. B. Scoville
First Vice-Pres...Dr. Chas. Lee King	Secretary.....Dr. E. H. McMillan
Second Vice-Pres. Mrs. Fordyce Grinnell	Treasurer.....Mr. A. Gosney

Redlands Society for the Study and Prevention of Tuberculosis

President.....Dr. Hoell Tyler	Vice-Pres. Dr. J. E. Payton
	Secretary.....Dr. Gayle G. Mosely

Sacramento (White Cross Crusaders)

President.....Dr. W. A. Briggs	Director.....Frank T. Dwyer
Vice-Pres.....A. Ronnhelm	Director.....E. Chas. Hemmings
Treasurer.....C. M. Goethe	Director.....W. F. Geary
Secretary.....A. L. Crane	

San Diego Society for the Study and Prevention of Tuberculosis

President.....Dr. Fred Baker	Secretary.....H. A. Thompson
Vice-Pres.....Dr. J. A. Parks	Treasurer.....Dr. Thos. S. Whitelock

San Francisco Association for the Study and Prevention of Tuberculosis

President.....Thos. E. Hayden	Executive Committee—President, Secre-
First Vice-Pres...Dr. Herbert C. Moffitt	tary, Treasurer, Mrs. Jno. F. Merrill.
Second Vice-Pres. Mrs. Jno. F. Merrill	Mrs. William H. Crocker, Dr. George
Secretary.....Dr. Wm. C. Voorsanger	H. Evans, Dr. Harry M. Sherman and
Treasurer.....The Crocker Nat'l Bank	Walter MacArthur.

Santa Ana Society for the Study and Prevention of Tuberculosis

President.....J. N. Anderson	Third Vice-Pres...Mrs. F. P. Nickey
First Vice-Pres...Dr. G. H. Dobson	Secretary.....Dr. John Wehrly
Second Vice-Pres.. Dr. Willala Howe- Waffle	Treasurer.....D. H. Thomas

Santa Barbara Society for the Study and Prevention of Tuberculosis

President.....Dr. Wm. H. Flint	Secretary.....Dr. Rexwald Brown
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Sierra Madre Society for the Study and Prevention of Tuberculosis

President.....E. W. Camp	Secretary.....J. Dent. C. B. Street
First Vice-Pres...Dr. R. H. Mackerras	Treasurer.....George Humphries
Second Vice-Pres.. Mrs. C. H. Baker	

EDITORIAL.

THE NEW OFFICERS.

The annual meeting of the California Association for the Study and Prevention of Tuberculosis was held at San Jose on April 21, 1909, the following officers being elected:

President, Dr. George H. Evans, of San Francisco; 1st vice-president, Dr. Fitch Mattison, of Pasadena; 2nd vice-president, Dr. Edward Von Adeling, of Oakland; secretary, Dr. George H. Kress, of Los Angeles; treasurer, Mr. C. H. Toll, of Los Angeles. Directors: Mr. C. B. Boothe, Los Angeles; Dr. N. K. Foster, Sacramento; Dr. Martin Regensburger, San Francisco; Dr. Renhart, Berkeley; Mr. Thomas B. Hayden, San Francisco; Mrs. John F. Merrill, San Francisco; Dr. C. C. Browning, Los Angeles; Dr. Wm. C. Voorsanger, San Francisco; Dr. Harry Sherman, San Francisco; Mr. Walter McArthur, San Francisco; Dr. George L. Cole, Los Angeles; Dr. L. M. Powers, Los Angeles; Mrs. Emma Greenleaf, Long Beach; Dr. W. Jarvis Barlow, Los Angeles; Dr. F. M. Pottenger, Monrovia; Dr. Henry Stehman, Pasadena; Dr. Gayle Moseley, Redlands; Dr. W. LeMoine Wills, Los Angeles; Dr. Rexwald Brown, Santa Barbara; Dr. W. A. Briggs, Sacramento; Dr. Norman Bridge, Pasadena; Dr. W. F. Snow, Stanford; Miss Mary J. Gale, San Diego; Dr. John C. King, Banning; Dr. W. W. Roblee, Riverside.

The president-elect, Dr. George H. Evans of San Francisco, having found it impossible to assume the duties of the presidency, the first vice-president, Dr. Fitch Mattison of Pasadena, appointed the chairmen of the standing committees and called a meeting of the Board of Directors and of the Executive Committee at Los Angeles, May 21st.

At this time the resignation of Dr. Evans as president was accepted and Dr. Mattison of Pasadena elected in his stead. Dr. Edward von Adeling of Oakland was elected first vice-president and Dr. John Dryer of Santa Ana second vice-president.

The following additional members of the Board of Directors were elected: Mr. A. Baxter, Berkeley; Mr. E. W. Camp, Sierra Madre; Dr. George H. Evans, San Francisco; Dr. E. A. Osborne, Santa Clara; Prof. A. Hyatt, Sacramento.

The president was instructed to endeavor to bring all the societies in close affiliation with the State Association, and a Committee on a Greetings Stamp was appointed.

TUBERCULOSIS HEADS LIST OF FATAL CAUSES.

[ASSOCIATED PRESS DAY REPORT.]

SACRAMENTO, May 25.—According to the State health bulletin issued to-day, there were 2349 births reported for the State during the month of April. The totals for the highest counties were as follows:

Los Angeles, 532; San Francisco, 506; Alameda, 289; Santa Clara, 127; Fresno, 79; San Bernardino, 54.

In the twenty-five charter cities there were 1522 births, Los Angeles having the highest outside of San Francisco's 506, the total being 365, with Oakland next, 173.

Of deaths there were 2616, a rate of 15.6 per cent. Los Angeles was highest of the counties, with 532; San Francisco next, with 517; Alameda, 258; Santa Clara, 104; San Bernardino, 80; San Joaquin, 77; Fresno, 71; Sonoma, 68; Napa, 59; San Diego 57.

The total for the freeholders' charter cities was 1401. Los Angeles city had the next highest total outside of San Francisco, being 309; Oakland next, with 126; Stockton, 34; San José, 32; Berkeley, 26. Tuberculosis was the leading cause of death, numbering 422.

Marriages reported for the month numbered 1699.

REPORT OF THE SECRETARY OF THE CALIFORNIA ASSOCIATION FOR THE STUDY AND PRE- VENTION OF TUBERCULOSIS.

For the Period Covering December 3, 1907, to April 22, 1909.
(A Period of 17 Months.)

Mr. President and Members:

The Southern California Anti-Tuberculosis League, which was established on December 3, 1902 (being at that time the seventh organization of its kind in the United States.) on December 3, 1907, in order to promote the anti-tuberculosis activities of the Golden State was merged into the California Association for the Study and Prevention of Tuberculosis. The constitution which was adopted by the State Association at that time provided for the care of dispensaries and helping stations under its supervision. The only dispensary in existence at that time was that of Los Angeles, which had been organized by the Southern California Society. The financial report herewith submitted shows that the income and expenses of the Los Angeles Dispensary, or Helping Station, were handled by the State Association up to January 1st, 1909, when its affairs were handed over to the Los Angeles Society. The Los Angeles Dispensary, or Helping Station, was maintained by the subscriptions of Los Angeles citizens, and most of the income of the State Association, during the period which this report covers, came from the same city, hardly twenty dollars having come from north of the Tehachepi. With the increased interest being manifested in the north, it is hoped the societies there organized will deem it advantageous to affiliate on the basis provided for in the constitution, viz., twenty-five cents of each one dollar's membership dues being sent to the State Association, no other financial demands being made.

The detailed financial report is as follows:

I. THE TOTAL RECEIPTS MAY BE SUBDIVIDED AS FOL- LOWS:

A.	To income for printing literature sold to the State, 300,000 one-page leaflets and 16,000 pamphlets distributed through the schools of the State.....	\$ 441.35
B.	To income from Red Cross stamps (joint campaign of State and L. A. Societies in Los Angeles) ..	724.50
C.	To income from subscriptions to Bulletin.....	105.00
D.	To "annual" membership fees	163.00
E.	To Helping Station donations	648.00
F.	To miscellaneous income...	376.85
		\$2458.70

II. THE TOTAL EXPENDITURES MAY BE SUBDIVIDED AS FOL- LOWS:

a.	To printing literature sold to the State.....	\$ 441.35
b.	To support of Helping Station	648.00
c.	To printing Bulletin.....	350.00
d.	To printing other literature	250.00
e.	To Red Cross Stamp (share of L. A. Society).....	400.00
f.	To other expenses.....	182.66
		\$222.01

III. SUMMARY.

1. Total funds received from
all sources.....\$2458.70
2. Total expenditures of all
nature 2272.01
3. Balance in the treasury
April 16, 1909.....\$ 186.69

Concerning the Work of the Association, This May Be Considered as Follows:

1. *Distribution of Literature.*

Co-operating with the California State Board of Health, the Association distributed 300,000 one-page circulars and 16,000 pamphlets through the schools of the State.

In addition much additional literature in the way of leaflets, etc., has been sent out. Several of these were copied in publications like the "*Journal of the Outdoor Life*" of the National Tuberculosis Association.

2. *Printing the Bulletin.*

Five copies of a bi-monthly publication known as the BULLETIN have been distributed. This BULLETIN reaches the members of all the Societies, the libraries, the newspapers, and at times the medical profession. It has been a powerful factor in centering interest on this work. As a result of its distribution, many letters have been received asking for educational literature.

3. *Lectures.*

Independently and in conjunction with the Public Health Commission of the Medical Society of the State of California, a large number of lectures have been given by officers of the Society, a total of probably thirty having been given before women's and civic clubs, medical societies, labor organizations, settlement centers, etc. Nearly all of these were given in Southern California.

4. *Newspaper Education.*

The newspapers have given much space to the work and have in this

way reached thousands. The Association is sending to most of the newspapers of the State, the press bulletins of the National Tuberculosis Association which appear every two weeks.

5. *Legislation.*

No attempt was made to secure new State laws during the last year other than to endorse the compulsory registration bill.

6. *Organization.*

When the State Association was formed, Los Angeles and Redlands were the only active centers of anti-tuberculosis activity. Since then, in the North, San Francisco and Alameda have formed new societies, and in the South the San Diego Society has been put on a more active basis, the Los Angeles Society was made independent of the State Society, and new societies have been formed at Santa Ana, Pasadena, Long Beach, Sierra Madre and Santa Barbara.

In addition, in the North, the White Cross Crusaders of Sacramento have stated their desire to affiliate, and in the South the Visiting Nurses' Association of Monrovia and the Los Angeles County Nurses' Association have affiliated.

From the above it is seen, that through this Association, literature has reached most of the homes of the State, and that where a little more than one year ago, only three societies existed, today eleven societies are carrying on the work, all but three of these being directly formed by officers of this Society. In addition, the educational campaign has been carried on through the lay press in an aggressive manner.

As regards the future, that will depend on the attitude of the local societies. If the local societies will affiliate on the 25-cent assessment basis for their different members, the State Society will be able to move ahead. If not, then the State Society, in order to exist, must carve out its own career,

i.e., if we are agreed that its existence will be a distinct help in unifying efforts and making for more aggressive and concentrated, and yet at the same time economical work. When we reflect that for this 25 cents each member receives six Bulletins—4 cents an issue—and that the educational movement for prevention and relief is given a distinct impetus, it can be seen that a twenty-five-cent assessment per member can in no way be deemed excessive.

The organization has certainly shown its right to exist and it may fairly point to what it has accomplished as evidence

therefor. Its number of actual members is very few, because the officers of the State Association have refrained from seeking members in cities where the local societies had also to seek membership.

The important work for this annual meeting, in addition to the annual election of officers, is the consideration of more efficient affiliation with the local societies and a discussion of wider organization and educational work.

Respectfully submitted,

GEORGE H. KRESS,
Secretary.

SUMMARY OF WORK OF SAN FRANCISCO ASSOCIATION.

The work of the San Francisco Association for the Study and Prevention of Tuberculosis has progressed steadily and rapidly. The First Annual Report which is a report of six months work, will show what the various committees have accomplished, and their financial standing. Since the issuance of that report \$2950 has been received from the sale of Red Cross Christmas Stamps.

The membership of the Association since its inception numbers about 1000, and is still increasing, and donations have been liberal.

The principal achievement of the past four months has been the opening of a Tuberculosis Clinic which is at present located in temporary quarters at 1734 Stockton street. The Dispensary began with two nurses and three clinicians, holding three clinics weekly. The force has been augmented to three nurses, and five clinics are being held weekly. The clinic is governed on the central dispensary plan, the aim being to make this a central dispensary from which others will emanate for other sections of the city. Representatives of the various colleges and clinic holding institutions, direct the clinic under the guidance of the Hospital and Dispensaries Committee of the Association. So far

the attendance has been very satisfactory; the first week the dispensary had an attendance of fifty new cases and since that time the attendance of old and new patients averages fifty to sixty patients weekly, and is now steadily growing. These patients are taken care of from the small Relief Fund of the Association, by the Associated Charities, and by the various charitable organizations of the city. They are visited in their homes by visiting nurses and in many cases places have been found for them in the country. At present the Association is maintaining two camps, each of which accommodates five or six patients. A one-story building of nine rooms upon a lot which has been leased to the Association gratis for the permanent dispensary and for the headquarters of the Association, is to be erected at once.

A course of six public lectures on various topics pertaining to tuberculosis recently completed were very well attended. A similar lecture course to the labor organizations and civic bodies of San Francisco is being started.

The Association is trying to persuade the Board of Health to pass an ordinance compelling all telephone companies to place sanitary protection caps

on the mouth-pieces of all telephones. There is every indication that this ordinance will be passed.

"We feel that the movement in San Francisco has met with most satisfactory results, and although we raise the same cry as all associations for 'more money,' we feel that the citizens of this city at least have met us more than half way."

WM. C. VOORSANGER.

A REQUEST FOR LITERATURE.

We print the following without change, because it shows how greatly information on tuberculosis is desired by all classes.

"BLOOMINGTON, CAL.

"Secretary California Tuberculosis Association, Los Angeles:

"pleas find enclosed 12 cts in stamps to pay for those little tracts that treat on How to manage Consumption. I found a little pamlet yo thru at a frierd of mine. I wist I had hole set Nos. 1 to 6. pleas address."

SAN DIEGO ASSOCIATION RE-ORGANIZES.

SOCIETY FORMED IN INTEREST OF HUMANITY.

Physicians and Philanthropists to Re-new Study for Prevention of Tuberculosis.

ORGANIZATION RENEWED.

Dr. J. A. Parks Elected President of Body; Advisory Board Is Chosen.

A meeting was held April 7th in the Agnew Sanitarium for the purpose of reorganizing the San Diego Society for the Study and Prevention of Tuberculosis. A large number of former members of the old organization and many others interested in the fight against the dread disease, were present, and the result was an exceedingly interesting meeting.

A committee composed of members of the old organization, that had been previously named, presented a constitution and set of by-laws which were unanimously adopted. The new papers are essentially the same as those of the old society, and the same as those in use by other organizations of like character throughout the country. After the adoption of the constitution and by-laws the organization was completed by the election of the following officers:

President, Dr. J. A. Parks; first vice-president, Dr. F. R. Burnham; second vice-president, Rev. W. E. Crabtree; third vice-president to be elected later; secretary, Mrs. M. B. Brust; treasurer, Dr. Thos. S. Whitelock; board of directors, Dr. Francis M. Alling, Dr. H. P. Newman, Chapman, Dr. L. G. Jones, Dr. Francis H. Mead, Dr. I. D. Webster, Rev. W. B. Thorp and Claude Woolman.

An advisory board was chosen consisting of the following members:

Dr. Homer C. Oatman, Dr. H. N. Goff, Mrs. H. P. Newman, Leroy A. Wright, Rev. C. L. Barnes, Rev. L. T. Guild, Dr. Fred Baker, Dr. H. H. Thompson, M. German, Julius Wangenheim, P. E. Woods, Mrs. S. C. Rood, Grant Conard, Capt. J. L. Sehon, Mother Josephine of St. Joseph's Sanitarium, Dr. D. P. Northrup of the County Hospital, Dr. R. S. Cummings of Paradise Valley Sanitarium, Dr. B. V. Franklin, Dr. J. C. Hearne of Hearne Hospital, W. L. Rohrer of the Agnew Sanitarium, Dr. Edward Grove, S. Furzer, Mrs. Adj. MacKenzie of the Salvation Army; Mrs. E. E. White and Mrs. James Macmullen of the Children's Home, Mrs. A. E. Dodson, Mrs. George L. Ballou, Dr. Thomas Cogswell of the San Diego Humane Society, J. J. Hellman of the Y. M. C. A., Dr. C. C. Valle, County Health Officer; Morris Goldtree, Dr. E. M. Fly, Mrs. G. A. Davidson.

The subject of organizing a local society of associated charities was taken

up by the meeting and Rev. W. E. Crabtree was appointed a committee of one to represent the society at the meeting next Monday night, at which it is proposed to form such an organization.

Outlining of active work and organization of working committees was left over until the next meeting of the society at some date in the near future.

TUBERCULOSIS IN 1908 COST CITY OF LOS ANGELES \$3,945,942.50.

The following calculation is an estimate of the amount of direct tax which tuberculosis exacted from the people of Los Angeles during the fiscal year of 1908. It errs on the side of conservatism in that no account is made of those people in whom the disease did not prove fatal.

During the year 1908, 689 persons died of tuberculosis in this city. According to the accepted figures of economic statisticians, each life is worth a certain amount, which varies according to the age of the individual. That is, an average of certain ages, will produce a certain amount of wealth during the remainder of life. On this basis, the following table is derived:

Age Period	Productive Value	No. of Deaths	Money Value
0 to 5	\$1500.00	23	\$ 34,500.00
5 to 10	2300.00	10	23,000.00
10 to 15	2500.00	7	17,500.00
15 to 20	3000.00	39	117,000.00
20 to 25	5000.00	79	395,000.00
25 to 30	7500.00	103	772,500.00
30 to 35	7000.00	106	742,000.00
35 to 40	6000.00	80	480,000.00
40 to 45	5500.00	63	346,500.00
45 to 50	5000.00	46	230,000.00
50 to 55	4500.00	41	184,500.00
55 to 60	4500.00	33	148,500.00
60 to 65	2000.00	22	44,000.00
65 to 70	1000.00	19	19,000.00
70 to 75	1000.00	8	8,000.00
75 to 80	500.00	10	5,000.00
80 to 85	500.00	1	500.00

Total\$3,567,500.00

The following table shows the value of the wages lost by those who died, assuming a loss of one year's time from work preceding death, and, assuming a wage earning capacity only between the ages of 15 and 60.

Age Period	Wages for One Year	No. of Deaths	Money Value
15 to 20	\$200.00	39	\$ 7,800.00
20 to 25	400.00	79	31,600.00
25 to 30	500.00	103	51,500.00
30 to 35	500.00	106	53,000.00
35 to 40	500.00	80	40,000.00
40 to 45	500.00	63	31,500.00
45 to 50	400.00	46	18,400.00
50 to 55	300.00	41	12,300.00
55 to 60	200.00	33	6,600.00

Total\$252,700.00

Each person who died was sick for possibly a year before death and, assuming a cost of fifty cents for each day of sickness, we have a total amount of

\$125,742.50

Thus it is seen that the amount that the disease exacted from our city for the year of 1908 was

\$3,945,942.50.

—Los Angeles Health Bulletin, Los Angeles Board of Health.

FACTS WORTH REMEMBERING IN TUBERCULOSIS.

Tuberculosis is a *communicable* disease.

Tuberculosis is a *preventable* disease.

Tuberculosis is a *curable* disease.

Tuberculosis is communicated by means of the *tubercle bacilli*, tiny vegetable micro-organisms which are thrown off from tubercular ulcerating surfaces, most frequently from the lungs in the expectoration.

The tubercular patient is not dangerous to others if this expectorated matter is properly destroyed.

Tuberculous discharges should be received in a receptacle such that the matter can be burned, or otherwise destroyed, and the receptacle boiled.

N.S. Vol. 1. No. VII.
1909



July, 1909.

The Bulletin

OF THE

California Association for the Study and Prevention of Tuberculosis

A BI-MONTHLY PUBLICATION

George H. Kress, M.D., Editor.

(Entered as second-class matter at the Postoffice at Sierra Madre, Los Angeles County, California.

The aim of this publication is to promote the study and dissemination of knowledge concerning the prevention and cure of tuberculosis, to aid in the establishment of institutions intended for those purposes, and to co-operate with such organizations as can render aid in the solution of the tuberculosis problem.

This Bulletin appears in January, March, May, July, September, and November.

Subscription price, \$1.00 a year, which includes membership in the California Association for the Study and Prevention of Tuberculosis.

All members of local societies which are affiliated with the California Association receive the Bulletin without further cost.

Editorial Board consists of Dr. George H. Kress, Editor, Los Angeles; Dr. George H. Evans, San Francisco; Dr. Gayle G. Moseley, Redlands; Miss Annis Coffey, Sierra Madre, and Miss Gertrude Tucker, Sierra Madre.

Editorial contributions may be sent to the office of publication, care of Miss Gertrude Tucker, Manager, P.O. Box 141, Suffolk Ave. and Sierra Madre Place, Sierra Madre, Cal.

Notice Regarding Copy.—The Secretaries of local societies are expected to send reports of the work of their organizations to the Editor, Dr. George H. Kress, 240 Bradbury Building, Los Angeles, without further notice. Officers and members of the state and local societies are urged to forward communications that seem to them to be of interest and if means allow, the same will be published.

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Second Vice-Pres. Dr. John Dryer Santa Ana, Cal.	240 Bradbury Bldg., Los Angeles

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(Arranged alphabetically)

Alameda County Society for the Study and Prevention of Tuberculosis

President.....Kenneth A. Millican	2nd V.-Pres....Miss Mary Page, Berkeley
1st V.-Pres....Dr. Edward Von Adeling	Secretary.....R. O. Moody, M.D.

Long Beach Society for the Study and Prevention of Tuberculosis

President.....Mrs. Emma Greenleaf	Secretary.....Prof. M. A. Huff
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Los Angeles Society for the Study and Prevention of Tuberculosis

President.....Dr. George L. Cole	Treasurer.....Mrs. Berthold Baruch
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Second Vice-Pres. A. L. Stetson	tary, Treasurer, Joseph Scott, Philip
Secretary.....Dr. George H. Kress	Forve, Dr. W. Jarvis Barlow, W. Le
	Moyné Willis.

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President.....Mrs. John H. Bartel	Secretary.....Mrs. W. Judson Smith
Vice-President. Mrs. M. L. Butts	Treasurer.....Mrs. J. J. Renaker
Vice-President. Mrs. Hardy Harris	

Pasadena Society for the Study and Prevention of Tuberculosis

President.....Dr. Henry Sherry	Third Vice-Pres...Mr. C. B. Scoville
First Vice-Pres...Dr. Chas. Lee King	Secretary.....Dr. E. H. McMillan
Second Vice-Pres. Mrs. Pordyce Grinnell	Treasurer.....Mr. A. Gosney

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Vice-Pres.....A. Bonnhelm	Director.....E. Chas. Hemmings
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Second Vice-Pres. Mrs. Jno. F. Merrill	Mrs. William H. Crocker, Dr. George
Secretary.....Dr. Wm. C. Voorsanger	H. Evans, Dr. Harry M. Sherman and
Treasurer.....The Crocker Nat'l Bank	Walter MacArthur.

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First Vice-Pres...Dr. R. H. Mackerras	Treasurer.....George Humphries
Second Vice-Pres.. Mrs. C. H. Baker	

EDITORIAL NOTES.

Owing to the depleted condition of the treasury of the State Association, it will be necessary to materially cut down the size of the BULLETIN for a time. During the Fall it is hoped to institute a campaign that will raise sufficient funds to place the organization and its publication on a firm and aggressive basis during the coming year.

The secretaries and treasurers of affiliated societies are requested to cooperate by sending in the assessment due from local affiliated organizations, viz, twenty-five cents from the annual dues of each local member.

In return the BULLETIN will be sent free to all members of such societies and other literature, for free distribution, in the way of pamphlets and leaflets, will be gladly sent to secretaries, on request therefor.

NEW STAMP ISSUED BY OUR ASSOCIATION.

The California Association for the Study and Prevention of Tuberculosis has just issued a new stamp, concerning which *The Los Angeles Express* of July 14, to the courtesy of which paper we are indebted for the use of the cut of the stamp, had the description given below.

Local affiliated societies can be supplied with these stamps, on the basis of fifty per cent. of the proceeds going to the local organization and the other fifty per cent. to the State Association.

These stamps can be placed on sale in the department stores and post-card agencies, and when deemed desirable a commission of ten per cent. may be giving the selling agents.

The stamps are supplied in small envelopes containing twenty-five stamps each. This method was necessary, owing to the lack of regular punching apparatus on the Coast.

The *Express* article, giving description of the stamp, is as follows:—



OPPORTUNITY, WHILE SENDING GREETINGS TO FRIENDS BACK EAST, TO AID IN COMBATTING THE DREADED TUBERCULOSIS.

Persons who wish to send a special token of greeting to friends "Back East" can now do so by attaching a special stamp to their letters and post-cards, and at the same time they will aid the crusade against the white plague.

A special California stamp has been designed to serve the same purpose as the holiday charity stamp that was sold over the country by the millions through the medium of the Red Cross last winter.

This stamp was placed on sale in Los Angeles today for the special benefit of the thousands of Eastern visitors who are here taking in the Elks' festivities.

In fact, the designing of the stamp was hastened so as to have it ready for the multitude of visitors who might wish to use them this week.

The stamps are sold at one cent each, and all the proceeds, from their sale goes on to aid in the fight against tuberculosis in California.

The principal way in which this fight is waged in Los Angeles is

through the maintenance of the helping station on Buena Vista street, where large numbers of indigent tuberculosis sufferers are continually helped, and which also sends out nurses among the poor to teach them to care for themselves and avoid spreading the plague to others.

Eastern people probably do not realize that hundreds of poor consumptives are sent to Southern California every year, and that they do not have any means of subsistence, but have to be aided by the community. The sale of the charity anti-tuberculosis stamps is one way of aiding these sufferers from the East.

Every time one of these stamps is attached to a letter or postcard, or to a package, it not only bears greetings from California, but it also adds a penny to the fund to aid sufferers who come here from the East.

This stamp is put out by the California Association for the Prevention of Tuberculosis. It is distinctively a California stamp. Its main feature is the California emblem of four flags, one typifying the Spanish regime, another the Mexican, the third the "bear flag," representing the brief period that California was independent, and the fourth the emblem of the Union.

In the center is the double cross of the white plague crusade, and on each side are the words: "Hope" and "Charity." The words, "California Greetings" are across the top, and on the corners are the initials of the association issuing it. It is about one inch square. The reproduction, given above, is enlarged.

The stamps are placed on sale with the department stores and the postal card stands and will be kept on sale permanently. They can be attached to any part of an envelope, card or package, but it is customary to place them on the lower left-hand corner of the envelope. It may be obtained in quantities from the helping station, 737 Buena Vista street.

HINTS AND HELPS IN THE TREATMENT OF TUBERCULOSIS.*

*The following hints and helps are taken from the case book given to each patient at the Agnes Memorial Sanatorium of Denver, Colo. Italics our own.—Editor.

Tuberculosis is an infectious disease, due to the introduction into the system of the tubercle bacillus; a micro-organism belonging to the vegetable kingdom.

This germ gains entrance to the human body in one of three ways: Through either inoculation, contaminated air, or infected food.

However, the question of paramount importance now, is, not how you acquired this disease, but how you shall proceed in order to get rid of it.

It is a proved fact that tuberculosis is curable, and the probability of cure is in direct proportion to the effort put forth by the individual. It is a fight for life, in which one's allies are good food, fresh air, sunshine and rest.

If to the fight are brought courage, a cheerful, contented mind, and the determination to get well, the possibility of recovery is enhanced an hundred-fold.

Second only in importance is a strict attention to all the details of the daily life; and lastly, the faith that can await with patience the passing of days, weeks, and months, for an ultimate cure.

CLOTHING—Dress according to the season, day, and time of day.

All clothing should be as light, loose and comfortable as possible, and yet give the maximum of warmth for the colder weather of winter. The clothing should in no way prevent the easy expansion of the lungs. Never wear chest protectors, and avoid heavy underwear.

FOR WOMEN—In winter, union suits are the most comfortable form of underwear, and should be of pure wool, or wool and silk. In summer, lisle, or lisle and silk mixed, answers every purpose.

All forms of corsets should be discarded; substitute for the corset a loose waist with shoulder straps to which the skirts can be fastened. In short, wear nothing which will interfere with abdominal breathing.

For winter days, additional warm un-

derskirts will be sufficient protection, and for extreme weather, woolen tights may be worn during the hours spent out of doors.

Always have *rubbers*, and know where to find them. Keep your *feet* warm and dry, if you would avoid colds; and keep them a reasonable distance from your hot-water bottle, if you would avoid chilblains.

Shoes should be low heeled and broad soled, never of patent leather. Neither low cut shoes nor slippers, nor lightweight hosiery, should be worn in cold weather.

FOR MEN—The style of *undergarments* is a matter of personal choice, the material the same as that suggested for women. The stiff bosomed *shirt* and high collar should be discarded in favor of the soft bosomed shirts with low turned collars, or, better, soft shirts with attached collars and unstarched cuffs; these may be worn summer and winter. For *winter wear*, under the coat, the unlined knit sweater buttoning down the front is a most serviceable garment, particularly for sitting out on cold days, or as an addition to the sleeping garments.

A light, soft felt *hat* or cap should be worn in preference to stiff hats. On *winter nights*, especially if sleeping in the open, a night cap of light flannel will be found necessary.

OUTDOOR LIFE—The length of your stay in a sanatorium, or the length of time required to cure or arrest your disease, will be in inverse proportion to the number of hours you spend in the *open air*. *Night air* is not harmful, and your room should never, even when you are dressing or disrobing, be entirely closed.

EXERCISE—Exercise will be regulated entirely by your physician, and you should adhere religiously to the length prescribed for your walk, as well as to the hour for taking the exercise. The exercise prescribed for someone else may in no way fit your case, and irregularity in this regard will not only fail to benefit you, but may prove detrimental to your welfare. *Never hurry*.

REST—Learn to *rest thoroughly*, completely, and during the prescribed hours of rest, relax every muscle in the body. These definite hours of prescribed rest are for a purpose. Before meals, the body, relaxed by the quiet and release of tension on the nerves, gains the opportunity to repair the loss sustained by previous exertions. Tuberculosis is a disease that exhausts vital energy, and only by persistence is it possible to overcome the debilitating effects of the poison with which the system becomes charged. No other one means of arresting the disease is so beneficial as that of absolute relaxation and rest, for both mind and body. For this reason, the rule requiring an early retiring hour is insisted upon. Never rest with the arms over the head.

FOOD AND DRINK—*Eat slowly, chew your food thoroughly*, and during the hours of digestion immediately following your meals, *rest absolutely*, if you would get the full value of the food stuffs you eat. Thirty to forty minutes is the least time you should spend at the table, and during that time every bit of food should be carefully masticated.

Drink little with your meals, but take plenty of water not less than an hour before meals, or two hours after. Have a pitcher of water within reach at night.

AMUSEMENTS—*Avoid all violent or exciting amusements, and any recreation that will keep you in-doors*. Primarily, you are not in a sanatorium to be amused, and since all amusements demand more or less energy, mental as well as physical, it is advisable to get along with as little as is consistent with your content of mind. Those persons who demand constant entertainment seldom accomplish the best results. It is well, however, to keep the mind occupied, and there are numerous quiet occupations and amusements which can be indulged in out of doors in moderation; and practice in the use of the eyes will reveal a new and unexplored world of nature, full of wonderful things for you to watch and think about.

When the weather prohibits your be-

ing out of doors (a rare thing in Colorado), see that your windows in room or tent are wide open; the only exception to this rule is during the occasional dust storm in spring or fall, and the driving rain storm that is occasional in summer. When in the card or billiard room, see that the windows are wide open; there is no danger of taking cold from a draught if you are properly clothed, or are not overheated from too fast a walk.

Do not go to the city except when it is absolutely necessary, and when you go, do not consent to execute commissions for others.

EXPECTORATION AND COUGH—The sputum is the greatest source of infection. It is harmless in the moist state, except by direct contact, but dried sputum will float in the air and may be inhaled. Proper receptacles for the sputum and prompt incineration of these articles minimize the danger to be feared from contamination through the sputum.

Never kiss on the mouth, even your dearest friends, and never kiss or fondle a little child.

Never swallow expectoration; this is highly dangerous, besides being a filthy habit; it may eventually cause intestinal tuberculosis, the most painful of all forms of the disease, and the least amenable to cure.

Never expectorate into the handkerchief, and do not use the handkerchief to wipe the lips after expectorating. It is better to discard the handkerchief and to use instead squares of bleached cotton which may be burned.

Always hold the hand before the mouth in coughing. Never use a book, paper or magazine for this purpose. *Wash the hands frequently*. You can learn to cough with the lips closed. *Control your cough*; seventy-five per cent. of all coughing is unnecessary.

With the instructions to patients at the Agnes Memorial Hospital are given directions on the following items:

Nourishment, before rising (hour, kind and amount).

Rise (at what hour).

Bath (kind).

BREAKFAST (hour, kind and amount).

Rest (time and kind).

Exercise (walk very slowly, hour 10-11).

Rest (amount).

Nourishment (time, kind and amount).

Recreation (time, kind and amount).

Rest, on bed (1 hour).

DINNER (hour, kind and amount).

Rest.

Exercise (walk very slowly, 3-4).

Rest.

Nourishment.

Recreation.

Rest on bed (1 hour).

SUPPER.

Rest.

Recreation.

Bed.

Lights Out.

Cleansing baths weekly, afternoon or bedtime.

Sleep in room, on porch. (Bed on porch in day time.)

SOME THOUGHTS WORTH REMEMBERING.

"Perseverance is the Parent of Success."

"You Never Know What You Can Do Until You Try."

"He Who Begins and Does Not Finish Loses His Labor."

"Put Your Own Shoulder to the Wheel."

"To the Jaundiced All Things Seem Yellow."

"One False Move May Lose the Game."

"They Are Never Alone That Are Accompanied With Noble Thoughts."

"All Is Not Lost That Is Delayed."

"Doctors May Give Advice, but They Cannot Give Conduct."

"Unused Advantages Are No Advantage."

"A Good Book Is the Best Companion."

"The Sunshine of Comfort Disperses the Clouds of Despair."

Flies are spreaders of consumption, by carrying the germs about from the sick to the well.

TUBERCULOSIS "DON'TS."

Tuberculosis is a communicable disease.

Tuberculosis is a preventable disease.

Tuberculosis is a curable disease.

Tuberculosis is communicated by means of the tubercle bacilli, tiny vegetable micro-organisms which are thrown off from tubercular ulcerating surfaces, most frequently from the lungs in the expectoration.

The tubercular patient is not dangerous to others if this expectorated matter is properly destroyed.

Tuberculous discharges should be received in a receptacle such that the matter can be burned, or otherwise destroyed, and the receptacle boiled.

Expectoration should never be swallowed.

When coughing or sneezing, patients should cover their mouths with their hand or handkerchief.

Several forms of spit cups are on the market, some of pasteboard which can be burned, others of metal which can be boiled, others of metal form holding a papier maché cup which can be replaced at a nominal expense. Whatever form used should be covered to prevent flies from coming in contact with the sputum.

Disinfectant solutions may be used; carbolic acid solution 5-100; concentrated lye one tablespoonful to a glass of water; formalin 5-100.

Expectoration into cloths which are carried in the pocket or placed about the bedding is a dangerous practice. The danger is of further infection of the patient and the infection of others.

If circumstances are such that cloths must be used temporarily, they should be burned, never washed. After the sputum has become dry they are dangerous to persons who handle them.

Expectorations should be destroyed before it dries.

Expectoration should be kept away from flies.

Never expectorate in dark corners.

Tuberculosis patients should always wash their teeth, mouth and hands before meals and frequently during the day.

Apartments used by consumptives should not contain carpets, unnecessary upholstery, curtains or tapestry.

Apartments which have been used by tubercular patients should be thoroughly disinfected under the direction of the health authorities or a competent physician.

Cases of tuberculosis should be reported to the proper health authorities, not for the purpose of quarantine, but for general instruction.

Those afflicted with tuberculosis should not play or associate intimately with children.

Tuberculosis is not apt to attack a person if otherwise in good health.

Have your living apartments as much exposed to direct sunlight as possible, and your sleeping apartments thoroughly ventilated.

Breathe through the nose. Children who breathe through the mouth have some form of nasal obstruction. This is dangerous to their health and interferes with their mental development.

Avoid dissipation and excess.

Remember that tuberculosis is curable, if the case comes early under the guidance of an intelligent physician.

(Circular I, Cal. Ass'n Study and Prevention of Tuberculosis,
240 Bradbury Building, Los Angeles, Cal.)

BUY CHARITY STAMPS.

Every Affiliated Society should place the Charity Stamps on Sale in its City.

Local secretaries should address the State Secretary for particulars. Read the special article in this issue.

DO YOUR PART.

Do your part in the Educational Work against Tuberculosis, by giving this Bulletin to some other person, after you have finished with it.

HOW THE GERMS OF CONSUMPTION ARE CARRIED FROM THE SICK TO THE WELL



CONSUMPTIVE SPITTING ON FLOOR.
FLIES FEEDING ON IT, CARRY THE
GERMS OF THE DISEASE TO FOOD.

THE SPIT DRIES AND CARELESS
SWEEPING, DUSTING OR DRAUGHTS
CAUSE THE GERMS TO FLOAT IN THE AIR.

THE GERMS MAY ENTER
THE BODIES OF CHILDREN
PLAYING ON THE FLOOR,
THROUGH SHOES OR RUGS.

OTHERS MAY GET THE DISEASE BY BREATHING
OR SHALLOWING THE GERMS.
SPRAY GIVEN OFF IN SNEEZING OR COUGHING,
CONTAINS GERMS IN A MOIST AND ACTIVE STATE.

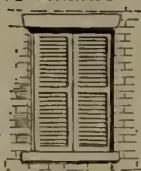
PUTTING FOOD, MONEY, PENCILS, ETC.,
INTO THE MOUTH AFTER A CONSUMPTIVE
HAS POISONED THEM WITH HIS SPIT.

NEW YORK STATE DEPARTMENT OF HEALTH.

CONSUMPTIONS ALLIES—AVOID THEM AND YOU ARE SAFEGUARDING AGAINST THE DISEASE



INTEMPERANCE AND
OTHER EXCESSES.



THE CLOSED WINDOW.



OVERWORK.



CROWDED SLEEPING
QUARTERS.



SMOKE AND DUST.



MOUTH BREATHING
OFTEN DUE TO ADENOIDES.

NEW YORK STATE DEPARTMENT OF HEALTH.

IN CASE OF CONSUMPTION, LOOK TO THESE FOR CURE



THE DOCTOR.



SUNLIGHT.



OUT-DOOR AIR.



GOOD FOOD.



REST.

NEW YORK STATE DEPARTMENT OF HEALTH.

A CAREFUL CONSUMPTIVE,—NOT DANGEROUS TO LIVE WITH.



COUGHS, SPITS AND
SNEEZES INTO
PAPER OR CLOTH,—



BURNS OR BOILS IT
BEFORE IT DRIES,—



OR PUTS IT INTO
A DISINFECTANT,—

(NEW YORK STATE DEPARTMENT OF HEALTH)



WASHES HER HANDS
BEFORE AND AFTER EATING—



ALWAYS USES THE SAME
DISHES AND BOILS THEM
IN WATER BEFORE WASHING
WITH OTHER DISHES,—



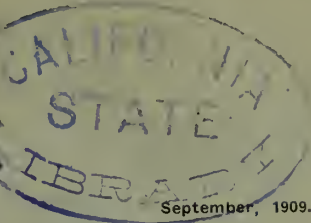
AND SLEEPS ALONE

Banner used in the New York State Department of Health Traveling Exhibit and shown at the International Congress on Tuberculosis

Designed under the direction of Herbert D. Pease, M.D., by C. W. Fiske

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h.s.v. 2 No 2



The Bulletin

OF THE

California Association for the Study and Prevention of Tuberculosis

A BI-MONTHLY PUBLICATION

George H. Kress, M.D., Editor.

(Entered as second-class matter at the Postoffice at Sierra Madre, Los Angeles County, California.

The aim of this publication is to promote the study and dissemination of knowledge concerning the prevention and cure of tuberculosis, to aid in the establishment of institutions intended for those purposes, and to co-operate with such organizations as can render aid in the solution of the tuberculosis problem.

This Bulletin appears in January, March, May, July, September, and November.

Subscription price, \$1.00 a year, which includes membership in the California Association for the Study and Prevention of Tuberculosis.

All members of local societies which are affiliated with the California Association receive the Bulletin without further cost.

Editorial Board consists of Dr. George H. Kress, Editor, Los Angeles; Dr. George H. Evans, San Francisco; Dr. Gayle G. Moseley, Redlands; Miss Annis Coffey, Sierra Madre, and Miss Gertrude Tucker, Sierra Madre.

Editorial contributions may be sent to the office of publication, care of Miss Gertrude Tucker, Manager, P.O. Box 141, Suffolk Ave. and Sierra Madre Place, Sierra Madre, Cal.

Notice Regarding Copy.—The Secretaries of local societies are expected to send reports of the work of their organizations to the Editor, Dr. George H. Kress, 240 Bradbury Building, Los Angeles, without further notice. Officers and members of the state and local societies are urged to forward communications that seem to them to be of interest and if means allow, the same will be published.

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DIRECTORY (See next page).

Directory of Tuberculosis Associations

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 of the Bulletin...Dr. George H. Kress
 240 Bradbury Bldg., Los Angeles

* * *

Local Affiliated Associations In California

(Arranged alphabetically)

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 2nd V.-Pres....Miss Mary Page, Berkeley
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EDITORIAL.

CHRISTMAS GREETING STAMP.

SPECIAL ANNOUNCEMENT.

The California Association Will Issue a Christmas and Happy New Year Stamp.

Purpose of the Stamp.

The California Association for the Study and Prevention of Tuberculosis will place on sale in December, 1909, a special Christmas and Happy New Year stamp.

The general design will be that published in the last BULLETIN, but a special form containing a margin with the name of the city will be issued for such cities as will send in orders for 10,000 stamps or more.

This special design is indicated by the cut in this BULLETIN. The margin will be bordered, however, with holly leaves, typical of the Christmas-New Year season.

Designs were drawn in the fall of 1908 for a stamp, but the lack of adequate time and printing facilities prevented the realization of the plans of last year.

Let it be distinctly understood, that this stamp is not issued in opposition to any other stamp or for the mere sake of having something different.

It is issued by the Association in order that the Association and its affiliated societies may be able to raise funds to carry on a most aggressive campaign against tuberculosis during the year 1910.

Terms of Sale.

The stamps will be sold on the same basis as the National Red Cross Stamps, viz., two-thirds of the proceeds to the local society selling the stamps and one-third of the proceeds to the California Association for the Study and Prevention of Tuberculosis (instead of to the National Red Cross).

Design of the Stamp.

The stamp is handsome in design, being printed in blue and red, in sheets of fifty. It tells the story of California's unique history, by showing the four flags under which the Southwest has been governed, and at the same time throws out into strong relief the object of the anti-tuberculosis work in our state. In addition, such societies as pay \$10.00 for the extra cuts, etc., can have stamps containing a local flavor, since the name of all such cities is printed in the border.

The Work of the California State Association.

As those who have watched the progress of anti-tuberculosis work and organization in California are aware, much of the present activity throughout the state is due to the state society.

When the state association was organized by merging into it the Southern California Society (which was the seventh anti-tuberculosis organization to be formed in the United States), there were but two anti-tuberculosis societies in California. Six new societies were directly formed through the State Association as noted in last year's BULLETINS, and several others were affiliated with it.

The State Association has distributed an enormous amount of literature: 300,000 pieces through the schools and many thousands more through BULLETINS.

In addition, the State Association has sent out the bulletin service of the National Association to the newspapers of the State and so has been indirectly a factor in bringing thousands of additional anti-tuberculosis articles before the public of California.

The Income of the State Association.

Now all these things cost money. Printers' bills and stamps run up into dollars.

No fair-minded person can do other than acknowledge that the influence of the State Association has been a potent factor in the work against the great white plague in California.

Nor can any fair-minded person do other than acknowledge that a State Association can still do much good work.

That this work is appreciated is shown by the fact that the educational literature of the Association has been widely copied in publications like the *Journal of the Outdoor Life* and commended in letters from eastern workers.

This work should be continued. The affiliated societies pay twenty-five cents from each local member's dues to the State Society, and the State Society makes little attempt to secure memberships in the homes of local societies.

The sum received from this source is not sufficient for a state educational campaign on a large scale. (In the Red Cross societies, of each membership fee of one dollar, fifty cents is sent to the National Headquarters, twenty-five cents to the State Headquarters and only twenty-five cents is retained by the local societies.)

Every City Can Raise Much Money with This Stamp.

The Christmas-New Year season gives every California society and city the opportunity of raising a sum of money sufficient almost to carry it through the year.

It is the easiest of all methods in raising money for anti-tuberculosis work, because it asks only a small sum from individuals, who are given value received for their money. The aggregate from everybody using the stamps is what brings up the total.

Let every city and hamlet take up this campaign in December, raise its share of funds for local anti-tubercu-

losis work, and January will then see California the best organized and financed state in the country in the warfare against the great white plague!

Stamps Should Be Ordered at Once.

In order to make the California Christmas and New Year stamp successful, it is necessary for the local societies to determine at once how many stamps they will need.

At Los Angeles, last year, starting three days before Christmas, seventy thousand stamps were sold, netting seven hundred dollars.

Kind of Stamp Should Be Stated.

Cities or communities not wishing to order at least ten thousand stamps, with the name of the city in the border, will be supplied with the general Christmas and New Year Stamp.

These stamps will be sold at the price of *one dollar per two thousand stamps*. This price applies to both kinds of stamps, the State Association standing the expense of the extra designs for communities wishing the name of their city or county to appear. Each stamp is then placed on sale at one cent each. Such a stamp can be placed on any part of the letter or package or postcard, regular U. S. postage being of course paid in addition.

Societies must promise to pay for all stamps they order, paying one dollar per two thousand stamps. No rebate can be given on unsold stamps.

The State Association will pay expressage, etc., to local societies.

The State Association will also send posters, samples, of letters, etc., by means of which interest may be aroused.

Outline of How a Local Campaign Should Be Conducted.

The plan of campaign briefly outlined should be somewhat as follows:

1. Let the local anti-tuberculosis or other society or individual agent or agents authorized by the California Association determine the number of

stamps it can possibly sell. (Every citizen sends at least one Christmas letter East. Many business men and merchants will send hundreds out. It is simply a matter of enlisting the interest of these persons.)

If no anti-tuberculosis society exists in your city and you wish to see the community take up this work, send in your name, or if possible the names of some friends or of a woman's or other club which will co-operate with you, and the State Association will gladly lend its aid in starting the work in your community. Now is the time to act. The urgency of the cause demands that you thrust aside all diffidence.

2. Then write at once to the Secretary of the State Association stating the exact number of stamps wanted. (To sell the stamps at the one dollar per 2,000 stamps rate, the printer demands that they all be printed at the same time). All orders for stamps at the above price must be in the hands of the Secretary of the Association, 240 Bradbury Building, Los Angeles, not later than November 1st.

Orders after that time must meet the extra charges of the printer for again placing the forms on the press, etc.

3. The stamps will be in the hands of the local societies or agents by December 1st.

4. In the meantime, let the local societies or agents send out letters or circulars explaining about the stamp, and

when the stamps and posters arrive in December, try to place them on sale everywhere with a hip and hurrah. Be sure to see the city editors of the local newspapers and secure their promise of co-operation by giving adequate publicity.

5. Have if possible one distributing point, taking a carbon receipt from stores which place the stamps on sale. These stores can render an account of their sales after the holidays. (Cunningham & Curtis Co., 252 South Spring Street, Los Angeles, will send carbon manifold receipt books containing 100 duplicate receipts, upon receipt of thirty-two cents.)

6. Make a special point of getting in touch with the merchants.

7. Keep the sale constantly before the public by articles or squibs in the newspapers. Strive to create local pride in a large sale.

A Word in Conclusion.

Attend to this matter at once.

If you have no anti-tuberculosis society, and yet believe your city should do its part in this work, send in your name to the Secretary of the State Association. Try to enlist the interest of some friends or of a club or clubs.

The State Association will send you the stamps, you can see to their sale, and then with the proceeds as a nucleus you will be able to start your anti-tuberculosis society without much trouble.

DESIGN OF THE CHRISTMAS STAMP.

The California Association for the Study and Prevention of Tuberculosis has just issued a new stamp, concerning which *The Los Angeles Express*, to the courtesy of which paper we are indebted for the use of the cut of the stamp, had the description given below.

Local affiliated societies can be supplied with these stamps, by agreeing to pay one dollar per two thousand

stamps. The stamps are supplied in sheets of fifty each.

These stamps can be placed on sale in the department stores and post-card agencies.

Persons who wish to send the greetings of the season to friends "Back East" and merchants who wish to extend the season's wishes to their customers, with their monthly or yearly statement, can now do so by attaching a

special stamp to their letters and postcards, and at the same time they will aid the crusade against the white plague.

A special California stamp has been designed to serve the same purpose as the holiday charity stamp that was sold over the country by the millions through the medium of the Red Cross last winter.

The stamps are sold at one cent each, and all the proceeds from their sale goes on to aid in the fight against tuberculosis in California.



Eastern people probably do not realize that hundreds of poor consumptives are sent to California every year, and that they do not have any means of subsistence, but have to be aided by the community. The sale of the charity anti-tuberculosis stamps is one way of aiding these sufferers from the East.

Every time one of these stamps is attached to a letter or postcard, or to a package, it not only bears greetings from California, but it also adds a penny to the fund to aid sufferers who come here from the East.

This stamp is put out by the California Association for the Prevention of Tuberculosis. It is distinctively a

California stamp. Its main feature is the California emblem of four flags, one typifying the Spanish regime, another the Mexican, the third the "bear flag," representing the brief period that California was independent, and the fourth the emblem of the Union.

In the center is the double cross of the white plague crusade, and on each side are the words: "Hope" and "Charity." The words, "California Greetings" are across the top, and on the corners are the initials of the association issuing it. It is about one inch square. The reproduction, given above, is enlarged.

The stamps are placed on sale with the department and other stores and the postal card stands. They can be attached to any part of an envelope, card or package, but it is customary to place them on the lower left-hand corner of the envelope.

One-third of the money will go to the State Association to help in the educational campaign which it contemplates to carry on by literature, lectures and exhibits, and the other two-thirds is spent by the local societies, for the support of dispensaries, sanatoriums, day camps, milk and eggs for worthy consumptives, etc.

THE ORIGIN OF THE CHRISTMAS GREETING STAMP.

This brief but interesting review of the origin of the Christmas stamp is taken from the April, 1909, *American Red Cross Bulletin*:

"What was the origin of the Christmas Stamp?" was a question asked of Red Cross officials scores—doubtless hundreds—of times during the holiday season. This much we knew: On a letter received two years ago from Denmark Mr. Jacob Riis discovered a new and unknown stamp which aroused his curiosity. Inquiries brought its story, which he told a few months later in *The Outlook*. Miss Emily P. Bissell, the able and energetic secretary of the Delaware Red Cross Branch, read the

story, and to the Annual Meeting of the Red Cross in 1907 brought a design for our first Christmas stamp for the benefit of the anti-tuberculosis work, asking permission that the Delaware Branch might experiment with it, and so it had its birth in America. So successful proved the little stamp this past year, it became a national stamp. The story of its sale and success is told elsewhere. But what about its origin? Was it first thought of in Denmark? No one seemed to know. Then came the Tuberculosis Congress, and with it a report on Swedish tuberculosis work. What a surprise it was to find in this interesting pamphlet the origin of the "Charity Stamp," as it is called, and still more of a surprise—a welcome surprise—to discover that its invention is

due to our own "Sanitary Commission"—that precursor of the Red Cross. The Swedish report says: "The honor of having invented the Charity Stamp must be given to America—that land of inventions." In the year 1862 the first Charity Stamps were sold at a great charity festival in Boston. These stamps, which were called "Sanitary Fair Stamps," were sold to benefit the wounded in the war then proceeding between the Northern and Southern States. The idea was not adopted in Europe until thirty years later, when in 1892 Portugal produced the first Charity Stamps (private stamps for the Red Cross Society). Since then almost every country in Europe has used them and several hundred different types have been called into existence."

JOTTINGS ABOUT LOCAL SOCIETIES OF CALIFORNIA.

SAN DIEGO SOCIETY FOR THE STUDY AND PREVENTION OF TUBERCULOSIS.

Mrs. Samuel Brust, Secretary, has sent the BULLETIN at our request the following interesting account of the work at San Diego:

On April 13th, 1909, Dr. C. C. Browning of Monrovia delivered an able address to a large and appreciative audience at the San Diego Club House. The subject of this lecture was "Tuberculosis—Its Prevention and Its Cure."

Immediately following this lecture steps towards reorganization of the San Diego Branch were taken. Dr. J. A. Parks, former president, was asked to retain the chair. Mrs. Sam'l Brust was nominated secretary pro tem.

Committees on nomination and by-laws were also appointed.

Meetings of different committees were held on April 15th, 17th, and on the 21st of April. After due consideration it was decided to adopt by-laws used by the Los Angeles Branch, and

recommend such action to the discretion of the board at its next meeting.

On April 27th, the local branch of this Association convened at Lecture Hall of the Agnew Sanatorium, and there, after a reading of the Los Angeles by-laws, adopted same, electing officers for ensuing years.

Since April 27th, we have endeavored to hold at least one monthly meeting of the entire society, though committee meetings are held more frequently.

Our membership list now includes fifty active yearly members (twenty-five of whom are in arrears) and forty-two on advisory board.

The enclosed circular letter is now being sent to our most prominent and representative citizens in the hopes of increasing our membership and helping the good cause.

At the very onset, starting with the limited funds of \$425, methods for rapid and effective relief work were considered. The early creation of an Associated Charities was deemed expedient.

To this effect, a mass meeting was called on June 10th, at the San Diego Club House. Our local Associated Charities is rapidly shaping organization and they are now seeking a suitable party to assume the position of registrar.

Our Tuberculosis Dispensary first opened its doors to the public on June 25th at 611 G Street.

Miss Katherine Hewitt, late superintendent of the Morris Porter Hospital of Chicago, is now our superintendent, and the credit of our growth and effective work is due vastly to her rare tact and untiring zeal.

Our dispensary is open daily, Sundays excepted, from 10 a.m. to 4 p.m.

A doctor is either daily in attendance or subject to the call of Miss Hewitt from noon to 2 p.m.

Doctors J. A. Parks, Ed Grove and H. N. Goff were on duty during June and July.

Doctors J. A. Parks, H. A. Thompson, Ed Grose, H. N. Goff and Robt. L. Doig are on duty this month.

Twenty-eight dispensary and seven outside patients have and are still taking treatment.

We report loss of one outside patient during month of July. A call from the Silent Messenger.

In connection with our dispensary, we have an Emergency loan closet, which promises to become an important feature of our institution, a connecting link as it were 'twixt the people and our labors.

The promised services of many prominent women will help furnish and make up garments needed.

Many times since we have started in the field of active work, have we felt the necessity of the Associated Charities, and until such organization is fairly under way our relief committee, consisting of Miss Hewitt, Mrs. M. German, Mrs. A. A. Hill, Dr. I. D. Webster and Dr. F. Burnham, is doing good work.

By early fall, we hope to have the "Friendly Visitors" an established important factor in our midst, several ladies and gentlemen already volunteering relief to our superintendent, thereby affording her the means of visiting those of our patients needing closer inspection.

The nature of work at dispensary has consisted in medical examination, diagnosis of cases, giving of medicines, distribution of literature, assisting when necessary and giving further aid when necessary.

The pathetic, the droll, the lowly, the rich, the tragic, the sick, the "unexpected?" even the undeserving—all have come to our door, none have been turned away, and what was at first deemed but a venture now promises to be a success, a hope, a useful endeavor. Furthermore, our funds will carry us over to the New Year, when more active and greater membership and the proceeds of the sale of the Christmas stamp will again speed us on to better, more systematic labor and achievement.

* * *

Dear Friend:

The dispensary of the San Diego Society for the Study and Prevention of Tuberculosis is now open at 611 G Street, from 10:00 a.m. to 4:00 p.m., with a trained nurse and physician in daily attendance.

An emergency closet, containing articles necessary for the relief of the sick and the needy, is to form one of the principal adjuncts of this institution. For the rendering of efficient aid, the articles named in the inclosed list are indispensable.

If you can help, kindly notify either Mrs. Samuel Brust or Miss Hewitt, Superintendent of the Dispensary, signifying what articles you will supply, and thereby oblige,

DISPENSARY COMMITTEE.

MISS HEWITT, Sunset Phone 2090.

MRS. BRUST, Sunset Phone 1427.

Articles Solicited.

- 12 doz. Sheets.
- 5 Bolts Cheesecloth.
- 12 Doz. Pillow Cases.
- 5 Doz. Cotton Blankets.
- 3 Sizes Safety Pins (1 gro. each).
- Leggins (to be made).
- 1 Bolt White Denim.
- 1 Bolt Light-weight, All-wool Flannel,
- 6 Bolts White Outing Flannel, 1 Bolt
- Twilled Canton Flannel, for infants'
- outfits.
- 1 Gro. ½-inch White Tape.
- Ice Bags.
- 1 Doz. Blk. Rubber Blankets.
- Feeding Bottles.
- 5 Bolts Muslin.
- 1 Gro. White Thread.
- Druggist's List.
- Muslin for 6 Doz. Short Hospital
- Gowns (to be made).
- Crutches (1 pr. promised).
- 3 Doz. Clean Granite Basins.
- 1 Bandage Roller.
- 100 lbs. Absorbent Cotton.
- 6 Gro. Sputum Cups.
- 2 Doz. Sputum Cup Holders.
- Porcelain Sputum Cups.
- Old Magazines.
- 1 lb. Bichloride.
- 1 lb. Creoline.
- 10 lbs. White Castile Soap.
- 10 lbs. Bore Vaseline.
- 16 lbs. Boracic Acid (crys.).
- 5 lbs. Talcum Powder.
- 6 Doz. Tooth Brushes.
- ½ Doz. Bed Pans.
- 1 Doz. Feeding Cups.
- 36 ft. Glass Tubing.
- 6 Syringe Bags.
- 12 Hot-water Bags.
- 2 Metal Hot-water Bags.
- 1 Hypodermic Syringe.
- 6 Hypodermic Needles.
- Ice Bags.
- Rubber Tubing.
- Feeding Bottles.
- 10 lbs. Green (Sa.) Soap.
- 1 Gro. 1-2 oz. Tin Boxes.
- 21 lbs. Powd. Boracic Acid.
- 1 Gro. Nail Brushes.

6 Thermometers.

½ Doz. Douche Pans.

Clean old Cotton Rags and Linen.

* * *

The local Board of the California Association for the Study and Prevention of Tuberculosis is established and is doing efficient work in our midst.

To meet the many growing demands we must have a larger membership. Will you not join us?

Very respectfully yours,

MINA B. BRUST, Secretary.

ALAMEDA COUNTY SOCIETY FOR THE STUDY AND PREVENTION OF TUBERCULOSIS.

Through the courtesy of Mr. J. A. Millican we recently received the following interesting press bulletin on the work and plans of the Alameda Society:

A specially called meeting of the Alameda County Society for the Study and Prevention of Tuberculosis was held on Sept. 10th, when the matter of the establishment of a sanatorium for the care of consumptive patients was discussed very thoroughly. The society is in receipt of a most magnanimous offer from the Rev. P. Blake of Napa, California, who constructed a building for this purpose at Mission San Jose in Alameda County some years ago with funds raised by private subscription. Subsequent developments changed the prelate's plans, however, and he has submitted to the society an offer whereby the building can be occupied by the payment of taxes and insurance only, eliminating entirely the matter of rental. There are, of course, certain important features, principally in connection with a permanent funding income, which must be carefully considered by the officers and executive council, and with that end in view, President Millican appointed a special committee, consisting of Dr. Edward von Adelung, A. K. Munson and George P. Baxter, to confer with Father Blake and see just exactly what arrangements can be made.

The work of the society locally is greatly interesting the ladies, there being twice as many of the latter present at the meeting as of the sterner sex. Miss Mary Page, the vice-president, is doing excellent work among her friends, while Miss Anna Brown, Dr. Florence Sylvester, Mrs. M. H. Coffee, Miss Wilson, Miss Mary McElroy, Miss A. A. Clow and others seem tireless in their efforts to assist in the work.

A number of committees were appointed by the chair, amongst the most important ones being on membership, special public meeting and stamps. The latter feature of the society's work was given into the sole care of Miss Anna Brown, who has generously offered to do all in her power to properly advertise and distribute the little emblems of the California Association in every possible practical manner.

Editor W. D. Wasson of the Oakland *Evening Mail* was appointed chairman of a committee of five which will have charge of the arrangements for a general meeting open to the public to be held during October. Speakers will be programmed and the event made as attractive as possible.

The agitation for the appointment of a meat inspector for the City of Oakland to take care of diseased meat and infected food-stuffs has been brought to the attention of the society and an investigation of the subject is being undertaken to ascertain what has been done along similar lines in other cities.

The society's officers will visit the city of Alameda Sept. 17th when a meeting of the general public will be held in the quarters of the Health Department of that municipality under the leadership of Dr. W. O. Smith, a warm supporter of the cause, and a sub-society, as it were, formed to co-operate with that in Oakland.

From the foregoing it will be seen, therefore, that the fight is on in this section of the State. It is readily rec-

ognized that the task is not an easy one. There are many obstacles to overcome, a great amount of public ignorance, and some personal opposition. But the cause is one for humanity, the results are possible of attainment, and in the end it will bear fruit to the proportion in which the seed has been judiciously and energetically sown.

SAN FRANCISCO SOCIETY FOR THE STUDY AND PREVENTION OF TUBERCULOSIS.

From a letter from Dr. Wm. C. Voor-sayger, we quote as follows: "On or about October 1st, we expect to move into our own building, a two-story structure located at No. 1547 Jackson street. This building, as has already been stated, will house the executive office, and our dispensary, and an exhibit (upstairs). The clinic will be rather spacious and well equipped, and we hope in efficiency second to none anywhere. The attendance at our dispensary has been very good and we believe that with new quarters and new equipment, we will be much better able to cope with the tuberculosis problem.

In putting up this building (it might be interesting to state) we are putting it up on a day labor plan, and that 90% of all the material, to the amount of about \$2,000, has been donated.

Our other work is progressing very well. We are at present evolving a plan for tuberculosis relief. We expect to organize a Committee of the Association which will co-operate with the Associated Charities and other charitable organizations in San Francisco for the purpose of raising large amounts of money annually, this money to be devoted exclusively to the relief of tuberculous patients and those dependent upon them. We will write you more of this plan of relief when it is in operation.

SANTA ANA SOCIETY FOR THE STUDY AND PREVENTION OF TUBERCULOSIS.

The *Santa Ana Register* recently printed the following excellent editorial:

The concerted movement being made by physicians and philanthropists against the "Great White Plague," is one of the most encouraging signs of the times. And it is so not only for the prospect it affords of the ultimate conquest of this great destroyer, but it shows that the noblest sentiments of the human heart are being brought under efficient organization for practical work along humanitarian lines. Perhaps these sentiments are no stronger and no more universal than formerly, and perhaps they are. This is largely a matter for speculation, as you cannot take a census of the moral attributes themselves, but of their visible effects only, and these visible effects are determined largely by the intelligence with which they are administered, and this again by the fact as to whether they are properly combined by organization.

At any rate an organized movement for the extermination of tuberculosis is being carried on over the country—and in which Santa Ana is nobly doing its part—that promises results,

at least for the protection of those not already infected with the disease, and of coming generations. The victims of the plague are also receiving, of course, every help that skill can in its present development devise, and the condition of those who cannot be cured is rendered more tolerable. More than this, the spread of general intelligence on the subjects of hygiene and of proper living is bound to result in bringing us nearer to ideal conditions.

But the moral to be suggested is the difference between organized and unorganized beneficence as applied to any particular work. When brought to bear on political or business affairs the lesson is an old one, and the principle on which it works is familiar to us all, but we seem to be just beginning to realize its force when applied along humanitarian lines. There are of course instances of its application to benevolent movements, but none of them so fully demonstrates its power for good as the organized fight against consumption. It is in the minds of many a contest against fate, except insofar as it may mitigate the severities of the scourge, but that does not stay their hands. They have the spirit that cannot be overawed by discouragement, and so the work goes on.

OF GENERAL INTEREST.

LOS ANGELES TUBERCULOSIS MORTALITY.

As showing the nature of the mortality in Los Angeles, and more particularly in connection with previous residence, the monthly bulletin of the Los Angeles Board of Health calls attention to the following figures: Of the 314 deaths from all causes reported during this month, 14 had lived here less than three months, 20 between three and six

months, 19 between six and twelve months, 85 between one and five years, 29 between five and ten years, 68 over ten years, 63 for life and 16 unknown. Of the 43 deaths from tuberculosis, 7 had lived here less than three months; 7 between three and six months, 6 between six and twelve months, 10 between one and five years, 6 between five and ten years, 5 over ten years, 1 for life and unknown 1.

COWS AND TUBERCULOSIS.

The great "white plague" among human kind will be largely disposed of when the great white plague among the dairy animals has been eradicated. Such is the view of David Roberts, State Veterinarian of Wisconsin. His experience convinces him that the most prolific soil for propagation of tuberculosis germs is the animal that is already run down and out of condition by common preventable and curable ailments.

There should be general cleanliness, good ventilation, thorough sanitation, and frequent disinfection of all quarters where cattle are kept. The conditions of the cow's life are reflected in that of human beings, since we are intimately dependent upon the cow for milk, cream, butter, and cheese, one

or more of which articles nearly every person consumes in greater or less quantity every day. Thorough sanitation of animals and quarters, and prompt attention to the more common and curable diseases are the methods whereby tuberculosis in cattle may be more speedily eradicated.

From about 20,000,000 cows there is produced in this country, in round numbers, 8,000,000,000 gallons of milk yearly, 1,500,000,000 pounds of butter and 300,000,000 pounds of cheese, valued in the aggregate at about \$70,000,000. Practically all the milk and butter is consumed in America, as well as 90 per cent. of the cheese. Outside of the bread grains there is no source of food so important as the dairies. Adulteration of this universal food, menacing though it is, is not so inimical as infection from diseased cows.

Sell the Merry Christmas and Happy New Year---California Greeting Stamp in Your City

**Use the money so received to help the poor
who suffer from tuberculosis and to prevent
other fellow citizens from becoming infected.**

If you have no anti-tuberculosis society in your city to take charge of this work in your city, ask a few of your friends to work with you as a committee in this campaign. A Society and organized effort against the disease will then come as a natural consequence.

Attend to this now.

The Christmas Season will allow you to raise a maximum amount of money, at a minimum of effort.

Do not delay, but send in your names and order by November 1st, at the latest. Stamps will be sent you on December 1st.

Address communications to the Secretary of the Association,

240 Bradbury Building, Los Angeles, Cal.



Vol. I, No. 9 (Old Series).
Vol. II, No. 3 (New Series).

November, 1909.

The Bulletin

OF THE

California Association for the Study and Prevention of Tuberculosis

A BI-MONTHLY PUBLICATION

George H. Kress, M.D., Editor.

(Entered as second-class matter at the Postoffice at Sierra Madre, Los Angeles County, California.

The aim of this publication is to promote the study and dissemination of knowledge concerning the prevention and cure of tuberculosis, to aid in the establishment of institutions intended for those purposes, and to co-operate with such organizations as can render aid in the solution of the tuberculosis problem.

This Bulletin appears in January, March, May, July, September, and November.

Subscription price, \$1.00 a year, which includes membership in the California Association for the Study and Prevention of Tuberculosis.

All members of local societies which are affiliated with the California Association receive the Bulletin without further cost.

Editorial Board consists of Dr. George H. Kress, Editor, Los Angeles; Dr. George H. Evans, San Francisco; Dr. Gayle G. Moseley, Redlands; Miss Annis Coffey, Sierra Madre, and Miss Gertrude Tucker, Sierra Madre.

Editorial contributions may be sent to the office of publication, care of Miss Gertrude Tucker, Manager, P.O. Box 141, Suffolk Ave. and Sierra Madre Place, Sierra Madre, Cal.

Notice Regarding Copy.—The Secretaries of local societies are expected to send reports of the work of their organizations to the Editor, Dr. George H. Kress, 240 Bradbury Building, Los Angeles, without further notice. Officers and members of the state and local societies are urged to forward communications that seem to them to be of interest and if means allow, the same will be published.

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DIRECTORY (See next page).

Directory of Tuberculosis Associations

International Tuberculosis Association

President.....Dr. Lawrence F. Flick, Philadelphia, Pa., U.S.A.
 First Vice-President.....Dr. Robert Koch, Berlin, Germany
 Second Vice-President.....Dr. L. Landouzy, Paris, France
 Third Vice-President.....Dr. Theodore Williams, London, England
 Secretary-General.....Dr. G. Pannwitz, Berlin, Germany.

National (U. S. A.) Association for the Study and Prevention of Tuberculosis

President.....Dr. Vincent Y. Bowditch
 Hon. Vice-Pres. Hon. Theodore Roosevelt
 Hon. Vice-Pres. Dr. Wm. Osler
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 Vice-President..Dr. Charles L. Minor
 Treasurer.....Gen. George M. Sternberg
 Secretary.....Dr. Henry Barton Jacobs
 Exec. Sect'y... Dr. Livingston Farrand
 105 E. 22nd St., N. Y.

* * *

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President.....Dr. Flitch C. E. Mattison
 Pasadena, Cal.
 First Vice-Pres..Dr. Edward von Adelung
 Oakland, Cal.
 Second Vice-Pres. Dr. John Dryer
 Santa Ana, Cal.
 Treasurer.....Mr. Charles H. Toll
 Los Angeles
 Secretary and Editor
 of the Bulletin...Dr. George H. Kress
 240 Bradbury Bldg., Los Angeles

* * *

Local Affiliated Associations in California (Arranged alphabetically)

Alameda County Society for the Study and Prevention of Tuberculosis

President.....Kenneth A. Millikan
 1st V.-Pres....Dr. Edward Von Adelung
 2nd V.-Pres....Miss Mary Page, Berkeley
 Secretary.....R. O. Moody, M.D.

Long Beach Society for the Study and Prevention of Tuberculosis

President.....Mrs. Emma Greenleaf
 Secretary.....Prof. M. A. Huff

Los Angeles Society for the Study and Prevention of Tuberculosis

President.....Dr. George L. Cole
 First Vice-Pres...Edwin T. Earl
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 Secretary.....Dr. Donald J. Frick
 Treasurer.....R. W. Kenny
 Executive Committee—President, Secretary, Treasurer, Joseph Scott, Philip Forve, Dr. W. Jarvis Barlow, W. Le Moyne Wills.

Monrovia (Visiting Nurses' Association)

President.....Mrs. John H. Bartel
 Vice-President. Mrs. M. L. Butts
 Vice-President. Mrs. Hardy Harris
 Secretary.....Mrs. W. Judson Smith
 Treasurer.....Mrs. J. J. Renaker

Pasadena Society for the Study and Prevention of Tuberculosis

President.....Dr. Henry Sherry
 First Vice-Pres...Dr. Chas. Lee King
 Second Vice-Pres. Mrs. Fordyce Grinnell
 Third Vice-Pres...Mr. C. B. Scoville
 Secretary.....Dr. E. H. McMillan
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Redlands Society for the Study and Prevention of Tuberculosis

President..Dr. Hoell Tyler
 Vice-Pres. Dr. J. E. Payton
 Secretary. Dr. Gayle G. Mosely
 Sacramento (White Cross Crusaders)

President.....Dr. W. A. Briggs
 Vice-Pres.....A. Bonnhelm
 Treasurer.....C. M. Goethe
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 Director.....Frank T. Dwyer
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San Diego Society for the Study and Prevention of Tuberculosis

President.....Dr. J. A. Parks
 First Vice-Pres...Dr. F. R. Burnham
 Second Vice-Pres...Rev. W. E. Crabtree
 Secretary.....Mrs. Samuel Brust

San Francisco Association for the Study and Prevention of Tuberculosis

President.....Thos. E. Hayden
 First Vice-Pres...Dr. Herbert C. Moffitt
 Second Vice-Pres. Mrs. Jno. F. Merrill
 Secretary.....Dr. Wm. C. Voorsanger
 Treasurer.....The Crocker Nat'l Bank
 Executive Committee—President, Secretary, Treasurer, Mrs. Jno. F. Merrill, Mrs. William H. Crocker, Dr. George H. Evans, Dr. Harry M. Sherman and Walter MacArthur.

Santa Ana Society for the Study and Prevention of Tuberculosis

President.....J. N. Anderson
 First Vice-Pres...Dr. G. H. Dobson
 Second Vice-Pres. Dr. Willa Howe-Waffle
 Third Vice-Pres...Mrs. F. P. Nickey
 Secretary.....Dr. John Wehrly
 Treasurer.....D. H. Thomas

Santa Barbara Society for the Study and Prevention of Tuberculosis

President.....Secretary.....Miss Marian Watts

Sierra Madre Society for the Study and Prevention of Tuberculosis

President.....E. W. Camp
 First Vice-Pres...Dr. R. H. Mackerras
 Second Vice-Pres.. Mrs. C. H. Baker
 Secretary.....Lieut. C. B. Street
 Treasurer.....George Humphries

THE BILLPOSTER CAMPAIGN AGAINST TUBERCULOSIS.

We have recently received the interesting, important and self-explanatory letters printed herewith, regarding the billposter campaign to be shortly inaugurated throughout the country.

We regret we cannot show photos of these posters in this issue.

We hope the local societies of California will give this matter their early attention.

The State Association for its part will try to reach the territory in California where there are no local societies to take charge of the work.

We have spoken to several of the California representatives of the Associated Billposters of the United States (of which there is a member in every city) and have been assured of their hearty co-operation.

The example set by the Associated Billposters is highly commendable and a high tribute to both their generosity and intelligence. We congratulate them and our country for having them.

The letters and circulars received from the National Association for the Study and Prevention of Tuberculosis, bearing on this matter, are as follows:

DR. GEORGE H. KRESS,
240 Bradbury Bldg.,
Los Angeles, Cal.

My Dear Doctor:

Enclosed please find a circular issued by the National Association for the Study and Prevention of Tuberculosis giving the information needed to obtain the use of the space on billboards donated for the campaign against tuberculosis, by the Associated Billposters and Distributors of the United States.

If your association desires to make use of this offer, kindly send a request to

your local billposter as soon as possible for the space on the billboards of your district. The Associated Billposters and Distributors have suggested that such requests be made by the local anti-tuberculosis associations and have directed their members to make a cordial response.

If you wish to make use of the posters supplied by the National Association, kindly notify us as soon as possible, and order by number.

Yours very truly,

THOS. C. CARRINGTON,
Assistant Secretary,
105 E. 22nd St., New York.

* * *

THE NATIONAL EDUCATIONAL BILLPOSTER CAMPAIGN.

1909-1910

Billboard Space and Posting
Donated by the Associated Billposters and Distributors of the United States. Printing Donated by the Poster Printers Association.

Under the direction of

The National Association for the
Study and Prevention of Tuberculosis.
105 East 22d Street, New York City

* * *

A RESOLUTION PASSED BY THE ASSOCIATED BILLPOSTERS AND DISTRIBUTORS OF THE UNITED STATES.

Recognizing the importance and the great necessity for effective anti-tuberculosis work throughout the entire country, as well as the immense advantage that it will be to our individual and associate interests to become identified with this great effort, the Associated Billposters and Distributors of the United States do hereby most fully en-

dorse and offer their hearty co-operation to the National Association for the Study and Prevention of Tuberculosis, in their plan for a campaign of education on the billboards against the "Great White Plague."

The association further directs its members to give their unqualified support and assistance to this campaign during the summer and winter of 1909-1910.

The billposters to post without charge on their vacant spaces such paper as may be furnished to them. The direct request for such posting to come from the local tuberculosis associations or authorities direct to the local member of the billposters association, in each city.

* * *

INFORMATION REGARDING THE EDUCATIONAL POSTER CAM- PAIGN FOR 1909-1910.

The National Association for the Study and Prevention of Tuberculosis is trying to stimulate the campaign of education regarding tuberculosis in every part of the United States and believes that attractive educational posters will impress upon the public that consumption can be prevented and cured. Many people do not read books or pamphlets, and are therefore most difficult to reach and yet most in need of instruction. They can only be attracted in some striking way, and the use of the billboards of the country for posting information regarding tuberculosis is a method of education which seems to meet these conditions.

The Associated Billposters of the United States have with great generosity offered all the vacant space on the billboards of the country to be used for displaying educational posters, and have offered, further, to put up free of charge the posters that are furnished. The Poster Printers Association, with similar generosity, have offered to print the posters gratis.

The designs shown in this circular have been selected from a large number of drawings offered by prominent artists and illustrators. As furnished, they will be an eight-sheet poster 7 feet wide by 9 feet 4 inches high, and can be used on single eight-sheet poster boards or in series on twenty-four-sheet poster boards. These are printed in three colors and will attract attention at a distance.

A strip of paper 28 inches wide by 14 inches high should be printed with the name and address of the local anti-tuberculosis organization, to notify persons where literature and information in regard to the prevention and treatment of tuberculosis can be obtained. This is to be placed at the bottom of the poster in a space reserved for that purpose. Enough posters will be supplied to societies or private individuals, who wish to use them for educational purposes in cities, towns and villages of the United States at the rate of one dollar for each poster space. This small charge includes the first poster put up and all the extra posters needed for a period of six months to replace those destroyed by wear or exposure, and is made to cover the incidental expenses of the National Association for the Study and Prevention of Tuberculosis.

Anyone ordering these posters is requested to notify the Billposting Company of their town and ask for information regarding the number of poster spaces they will supply for this purpose. A rough estimate of the number of poster spaces needed in any one locality can be made by allowing one poster to each 1000 of the population.

The National Association intends to furnish other designs and suggestions for use as posters from time to time, and therefore will not send the total number of posters needed for six months in the first delivery, unless so requested.

For further information, or when ordering the posters, address
NATIONAL ASSOCIATION FOR THE STUDY
AND PREVENTION OF TUBERCULOSIS,
105 East 22d Street, New York City.

A PATHETIC STORY.

Stories equally pathetic to the one herewith printed, as taken from the *Los Angeles Times*, are occurring almost daily in Colorado, Arizona, New Mexico and California.

Only those who deal with the indigent consumptives of our climatic resorts can appreciate the sadness of these poor patients. Thus yesterday, to one of the tuberculosis clinics of the Los Angeles Society, came four new patients, all having tuberculosis. All four were virtually poverty-stricken and three lived in rooming-houses. All were equally hopeless as regards means of living and ability to do the things necessary to help themselves and to prevent the infection of others.

Not infrequently we hear criticisms of the anti-tuberculosis agitation because it calls attention to this dreadful disease and so inhibits confidence and business and growth of the community.

In the face, however, of the importance of this great public health problem there can be no hesitancy in pushing the warfare against the disease.

The story which the *Los Angeles Times* printed is as follows:

TINY LAD DIGS MOTHER'S GRAVE.

COLLAPSES AS EARTH FALLS ON LOWERED COFFIN.

Strain of Grief and the Physical Labor of Making His Dearly Loved Parent's Last Resting Place Proves Too Much for Little Boy of Twelve. Strangers Finish Sad Ceremony.

Colorado Springs (Colo.), Oct. 27.—[Exclusive Dispatch.] Because he did not have money enough to pay for his mother's casket and the work of digging her grave, Richard Swineford,

aged 12, dug the grave himself. Today, while assisting in filling it, after the body had been lowered, he collapsed under the strain of grief and was carried away, while strangers finished the work.

With the money available, a cheaper coffin could have been provided and men hired to dig the grave, but the boy insisted that all the money should be spent upon the casket, and he would do the work. The authorities paid little heed to his request, as they did not consider such a mite of a boy could dig a grave, but he was in earnest, and this morning the sexton found the boy still digging at the grave. He had worked all of the night.

Mrs. Swineford, who came here from Owosso, Mich., early in the summer, died of tuberculosis two weeks ago, and her remains were placed in a receiving vault in Crystal Park Cemetery until relatives could forward money to pay for burial. Meanwhile, neighbors had taken charge of the boy. When the money came it was not sufficient to pay all expenses, and while the authorities delayed, the boy dug the grave, without the knowledge of the county commissioners.

LETTER OF LOS ANGELES SOCIETY CONCERNING THE CHRISTMAS STAMP.

The Los Angeles Society recently sent out the following letter in connection with its Christmas Stamp campaign: To All to Whom These Presents May

Come, Greeting.

Dear Friend:

The Christmas-New Year Season is again at hand.

In addition to your regular correspondence, you will shortly send out many letters containing the greetings of the season.

We address you to ask that you place the Merry Christmas-Happy New Year stamp of the California Association for the Prevention of Tuberculosis (a spec-

imen of which you will find attached to this letter) on *all* your correspondence. These stamps sell for one cent each.

We make this appeal on two grounds:

One, because your co-operation will help bring aid and succor to many poor consumptives who are now in our midst, and give them a decent chance to regain health and again become useful citizens; and

Two, because you owe it to yourself, and to your city, that these unfortunate consumptives should be given that aid and instruction which will prevent them from infecting their fellow-citizens—perhaps of infecting some of your own friends or even a member of your family.

California's mortality from tuberculosis is one of the highest in the Union. The climate of Southern California draws a very large number of indigent consumptives to Los Angeles. Last year there were 689 deaths from tuberculosis in our city (lives worth in dollars and cents more than \$3,000,000—*Bulletin L. A. Board of Health*). That means probably 2500 or more persons constantly sick with the disease in our midst. It has been shown that 50 per cent of these are in meager circumstances. Now every such person is liable to help transmit the disease to others, unless properly instructed and given proper aid. Since its establishment in 1907, the Helping Station and Dispensary of the Los Angeles Society for the Prevention of Tuberculosis, located at 737 Buena Vista Street, has cared for more than 600 of these ambulant poor patients. These may not be pleasant facts, but we who live here should know them.

The California and Los Angeles Societies were organized for this special work. They secure the services of their physicians free, but food and nursing cost money.

These societies present the Christmas stamp to your consideration. The

stamps are sold for one cent each, and can be placed anywhere on a letter or package. Each stamp in beautiful design and colors shows the four flags under which California has been ruled—the Spanish, the Mexican, the Californian, the Stars and Stripes. The double cross is the insignia, the world over, of all tuberculosis societies.

Each stamp also carries the Merry Christmas-Happy New Year Greeting from you and from Los Angeles.

Last year millions of these Christmas stamps were sold in the United States, to aid in the anti-tuberculosis work.

We urge upon you, as a matter of humanitarian effort as well as of civic pride, that you make these little stamps known from one end of the country to the other.

If you have a store for retail shoppers, we ask you to place these stamps on sale at one of your counters. We will be glad to supply stamps on consignment, and in January you can return the unsold stamps and remit for the balance.

If you are a merchant, we request you to extend the greetings of the season to your customers, by placing these little stamps on all your bills, catalogs and letters.

If you are a citizen, we urge you to place these stamps on all your Christmas and New Year letters and packages.

In short, lose no opportunity to speak of these stamps, or to sell them to others, or to use them yourself.

Attached find order blanks for stamps, which will receive prompt attention.

The central distributing agency for these stamps will be established in Sun Drug Store No. 2, at 328 South Broadway, between Third and Fourth streets. It will be charge of Mrs. E. B. Dodge. Telephones, Main 229 and Home 3280. The stamps will come in sheets of fifty, but smaller amounts may be obtained in stores throughout the city. Written orders for stamps may also be sent to

the secretary of the State Association, 240 Bradbury Bldg., Los Angeles.

Soliciting your prompt and kind co-operation, and with best wishes for the Holiday Season, we are, very truly yours,

The Los Angeles Association for the Prevention of Tuberculosis.

P. S.—You will note that two forms of stamps are issued:

One, a "Merry Christmas-Happy New Year stamp," as per sample attached to this letter; and

Two, a "Season's Greetings" stamp as per sample attached to the envelope of this letter.

Order by the above name. Unless otherwise specified, the "Merry Christmas-Happy New Year Stamp" will always be sent.

That poverty is a friend to consumption is demonstrated by some recent German statistics, which show that of 10,000 well-to-do persons, 40 annually die of consumption; of the same number only moderately well-to-do, 66; of the same number really poor, 77; and of paupers, 97. According to John Burns, the famous English labor leader, 90 per cent. of the consumptives in London receive charitable relief in their homes.

AN ARTICLE ON THE CHRISTMAS STAMP OF THE ASSOCIATION.

The *Los Angeles Times* of November 21st printed the article on the Christmas Stamp of the Association presented herewith.

Any societies, clubs or individuals who wish further information regarding the stamp can secure the same by writing to the editor, 240 Bradbury Bldg., Los Angeles.

Stamps are sold at wholesale at one dollar per 2000 stamps, and are then retailed at one cent each; one third of the net proceeds going to the State Association, and the remaining two

thirds to the work of the local society or committee

Christmas Near.

DECORATE YOUR GIFT PACKAGES.

USE STAMPS PRINTED TO AID CHARITABLE CAUSE.

California Society for Prevention of Tuberculosis Has Designed Pretty Label for Holiday Letters and Postcards—Hopes to Swell Fund to Sustain Its Great Work.

Most shoppers at Christmas time buy numbers of "Merry Christmas and Happy New Year" stamps, with which to decorate letters and packages sent to relatives and friends, with the season's compliments.

Making note of this fact, the California Association for the Prevention of Tuberculosis has had designed a handsome stamp, printed in red and blue, emblematic of the Golden State, which will be placed on sale throughout California at 1 cent each, and the organization asks the public to purchase these stamps in preference to others used for the same purpose. It is called the "California Christmas-New Year Stamp."

It must not be understood by anyone that the stamps take the place of the United States postage stamp, but must be used in addition thereto, simply as a decoration or seal. It is about one inch square.

The Wisconsin Anti-Tuberculosis Association is also getting out a State stamp this year and the National Tuberculosis Association recently mailed to all subordinate societies a copy of their poster.

Use them on the lower left corner of your letters; on your postcards, on your newspapers; to decorate and seal your holiday packages.

Use plenty of them; they add greatly to the attractiveness of a package, and are a vast improvement over writ-

ing the season's compliments on the wrappers with a pencil.

Every stamp used will add 1 cent to the revenue of the anti-tuberculosis crusade, as they are sold without commission or profit to the sellers. Two-thirds of the proceeds will go to the local society and one-third to the State society.

The design of the stamp tells the story of California's unique history—the four flags under which she has been governed. One flag typifies the Spanish regime; another the period of Mexican rule; the third, the "Bear Flag," representing the brief period of California's independence, and last, the emblem of the Union. Over all, is the red, double cross of the white plague crusade.

Last year millions of these anti-tuberculosis stamps were sold throughout the country, but the history of the "Charity Stamp" runs back for a half century. It was first used by the Sanitary Commission in 1862, in Boston, and was called the "Sanitary Fair Stamp," the proceeds being for the benefit of wounded soldiers of the Civil War, then in progress. For thirty years, it seems that no organization took it up again, and then Portugal came forward with a "Charity Stamp," for the benefit of the Red Cross Society, since which time it has been common in European countries.

Dr. George H. Kress, secretary of the State association, has addressed a letter to merchants and other persons, urging them to use the stamps on all their holiday letters, bills and other correspondence, and to place them on sale in their stores. They are printed in sheets of fifty each, and are sold for personal use at \$1 per 100. Stores may obtain all they wish by merely ordering them, agreeing to return all unsold stamps and to remit for those sold, at the rate of 1 cent each, early in January. Outside cities and towns

may have them printed to suit the community, and will be supplied at the rate of \$1 for 2000 stamps, the proceeds from their sale to go to the local organization taking up the work.

It is an entirely unselfish and unremunerative work, so far as the California and Los Angeles associations are concerned, as the names of the directors of the local society will indicate. They are A. L. Stetson, Joseph Scott, Philip Forve, Dr. George H. Kress, Dr. W. LeMoyné Wills, Dr. Joseph M. King, Dr. W. Jarvis Barlow, Dr. Norman Bridge, Dr. C. H. Whitman, Dr. L. M. Powers, Dr. C. C. Browning, Isaac Norton, C. B. Boothe, Dr. L. G. McNeil.

Few people are aware of the vast call that is made upon the medical profession and charitable organizations by tuberculosis patients. The Free Helping Station, No. 737 Buena Vista street, this city, has cared for over 600 in the two years of its existence, all of them having come here from the East in the hope of being cured. They have been given free advice, free treatment and nurse visitation, and in many cases, needed nourishment. The stamp sale will go toward sustaining this station, and for financing the work in other directions.

The Red Cross stamp was put on sale last year in this city, three days before Christmas, and resulted in the sale of 70,000 stamps, bringing \$700 into the treasury of the association. It is hoped by the early organization of the work this year, to create a great fund for sustaining the work.

The Barlow Sanatorium of this city was the first institution in California to attempt to stem the tide of the dread disease in a systematic way, and it took in its first patient on September 1, 1903. Then followed the organization of the Anti-Tuberculosis League, afterwards changed to the California Association for the Preven-

tion of Tuberculosis, and the helping station for indigent patients was opened in 1906. The latter is open five days each week and has two trained nurses in the field to look after the patients.

The entire medical profession of Los Angeles, and in fact of all Southern California, is enlisted in this great work of humanity, and is giving freely of its services to the relief of the unfortunates who come to our gates in the grasp of the dread white plague.

In addition to the physicians, hundreds of men and women of the city have enlisted in the crusade, and with their influence and their money are aiding in the work of cure and prevention.

A recent bulletin of the State Association stated: "The pathetic, the droll, the lowly, the rich, the tragic, the sick, the unexpected, even the undeserving, all have come to our door. None have been turned away, and what was at first deemed but a venture, now promises to be a success, a hope, a useful endeavor."

THE BULLETIN OF THE MUNICIPAL COMMISSION ON TUBERCULOSIS OF ST. LOUIS.

We note that the October Bulletin of the Municipal Commission on Tuberculosis of St. Louis has adopted our plan of publishing a directory of international, national, state and local tuberculosis societies.

St. Louis is setting an excellent example to other cities in recognizing the need of specific municipal effort against the disease.

It may be of interest to add that Dr. Kenneth W. Millican of St. Louis, who has recently assumed the editorship of the Bulletin, is the father of the president of the Alameda County Society, Mr. Kenneth A. Millican.

ALAMEDA COUNTY SOCIETY MAKING GREAT PROGRESS AND SETTING A PACE FOR SISTER ORGANIZATIONS.

The past month has been a most encouraging and successful one for the Alameda County Society for the Study and Prevention of Tuberculosis. A special committee, of which Dr. Florence Sylvester was appointed chairman, undertook the by no means easy task of arranging for a public mass-meeting, which was held in the admirable assembly hall of the Chabot Observatory, located in the very center of Oakland. The program, which embodied an excellent stereopticon lecture by Dr. Archibald Ward of Berkeley University, who is the State bacteriologist; a stirring talk on organization by President T. E. Hayden of the San Francisco Society for the Study and Prevention of Tuberculosis; some personal reminiscences by Miss Lucy B. Fisher, supervising nurse of the same organization, and some powerful remarks on the condition of the Alameda County Hospital by Dr. E. A. Majors, one of the society's most active workers, was favorably received by a larger audience than was expected, and much good was done. Dr. Sylvester had also been thoughtful enough to provide some diversion in the way of a magnificent solo by Mr. W. E. Leydecker of Alameda, this being greatly appreciated by the audience, to whom the entire evening seemed to strongly appeal.

Literature of different kinds was freely distributed, and the membership of the Society was increased to a gratifying degree.

The work of distributing the Society's stamp progresses marvelously well under the supervision of Miss Anne F. Brown, who has been indefatigable in her efforts to make the Society an unusually successful one. There appears to be a pride taken by the people of Alameda county in work of this nature and apparently an earnest desire exists

to make a brilliant showing of what this section of the State can do in organization labors.

Mrs. Louise G. Smith, secretary of the Oakland Ebells, is doing missionary work among the members of that club and other similar organizations in different parts of the county have shown a pleasing willingness to do what they can in the campaign against the disease.

One of the most agreeable surprises which the Society has yet had was the receipt in the early part of November of a life membership from Frank M. Smith, familiarly known as "The Borax King". Enclosed with the application was a check for one hundred dollars and a letter of encouragement which the officers regard as a sincere wish for the Society's success. Mr. Smith is known as a man whose generous donations to charitable works are first carefully surveyed that they may be sure of use in the proper channels, and his recognition of the war on consumption is looked upon as proof of his careful investigation as to the practicability of the work.

Meetings of the Executive Committee at which all committee chairmen and members are present are frequently held so that each one may keep in thorough touch with what is being done and what is being planned for the future. The resignation of Dr. S. H. Buteau from the Executive Council which was recently tendered on account of that gentleman's inability to take an active part for the present, was followed by the election to the vacancy of Mr. A. H. Breed, a prominent business man of Oakland, whose influence and activity cannot be overestimated.

A mass-meeting somewhat along the lines of the one recently held in Oakland was well attended in Alameda on November 12th, at which Vice-President Edward von Adelung spoke. Dr. W. O. Smith of Alameda is active in the work in that city, which is being carried on by a subcommittee which re-

tains its local individuality for civic reasons, but is affiliated with the County Society through membership.

Specimens of sputum cups, open-air sleeping tents, sterilized paper handkerchiefs and similar supplies have been sent to the local office at the request of the assistant secretary, and visitors seeking information have an opportunity to see the practical side of the work.

Miss Gertrude Montfort, a local nurse who is well known in professional circles, has taken an active interest in the Society and is prosecuting the work of organization vigorously among the members of her calling. The Rev. Clifton Macon of the Episcopal Church is arranging with the ministry of the county for the setting apart of one Sunday during December, when the topic of tuberculosis and its practical overcoming will take the place of the usual sermon.

There is no cessation in the war. Physician, layman, clergy, business man, all alike have taken hold of the reins, and there will in time be in Alameda county a branch of the National and of the State organization which shall be a credit to the leaders of the movement.

AN OUTLINE OF THE STATUS OF ANTI-TUBERCULOSIS WORK IN LOS ANGELES COUNTY.

In a recent reply by the editor to some queries from the president of the Alameda County Society, we had occasion to briefly enumerate some of the anti-tuberculosis work and activities in L. A. county. In a future issue we hope to present photograph views of some of the buildings mentioned. In this connection the editor of the Bulletin wishes to state he will be glad to run special numbers with large editions, for any of the local societies wishing to reach a large number of citizens in connection with a presentation of local issues. The excerpts from the letter to which we referred are as follows:

The different Societies that work in the city of Los Angeles and which deal with the cure of consumptives are:

1. The Helping Station of the Los Angeles Society for the Prevention of Tuberculosis;
2. The Los Angeles County and City Hospital;
3. The Barlow Sanatorium for Indigent Consumptives;
4. The Municipal Visiting Nurses.

In addition to these, the Associated Charities, the Hebrew Benevolent and other organizations work hand in hand to care for the unfortunate sick who are afflicted with the great white plague.

Up to a year ago the conditions at the Los Angeles County Hospital, so far as the care of consumptives was concerned, were certainly far from what a civilized community ought to do in the face of the knowledge which all possess regarding the cure of this disease.

The Los Angeles Board of Supervisors recently provided for the erection of new tuberculosis wards at the County Hospital at a cost of \$50,000, and it is hoped to enter this new building before December 1st. It is a three-story building with central rooms for the nurses and a large ward at each end. It is fireproof and has cement porches that are 16 feet or so wide, upon which it is proposed to place the beds and so keep the patient out of doors all the time. In the rear of this building the grounds are being graded and are being made into a park so that within the next month it may be said the Los Angeles County Hospital will probably have the finest buildings of a permanent nature exclusively devoted to tuberculosis west of the Rocky Mountains. In addition to the medical superintendent and house physicians, there is an attending staff.

We have at the present time at the hospital eight tent houses in addition to the two wards, the total number of

tuberculosis patients being at this time about 97.

The Barlow Sanatorium was established about eight years ago through the efforts of the Dean of the Los Angeles Department of the College of Medicine of the State University of California, and Dr. Barlow has been able, in this brief time, to build up an institution that has buildings that have cost little short of \$100,000 and that in addition to this has an endowment fund of some \$75,000. Only yesterday the daily press announced that the late Mrs. Jones, a pioneer resident of Los Angeles, who gave \$100,000 for scholarships to poor students at Berkeley, also bequeathed \$10,000 to the Barlow Sanatorium. Thus you see this institution, which is philanthropic in that it charges only \$5 per week per patient—although the actual expenses for care approximate \$9 per week—is gradually getting a firmer and firmer hold on the hearts of our people.

As regards the work of the visiting nurses, these nurses are at the present time on salary from the city of Los Angeles and we have no special tuberculosis nurse, but in January it is our intention to go before the City Council and present the need of such a nurse, and we hope to have an ordinance passed that will enable such a nurse to go on service and work in conjunction with the Helping Station of the Los Angeles Society for the Prevention of Tuberculosis. This will allow that Society not to expend its funds in salary for a visiting nurse, but in the purchase of milk, eggs, and the securing of a proper environment for the unfortunate ambulant cases that come to its clinics. In our Helping Station (which was formerly the Tuberculosis Clinic of the College of Medicine of the State University) we have in the last several years cared for over 600 ambulant consumptives.

This is not all the work that is being done in the county of Los Angeles.

Only last Tuesday night at a meeting of the Certified Milk Commission of Los Angeles County Medical Association, we were speaking to Dr. Henry Stehman of Pasadena (who was formerly Superintendent of the Presbyterian Hospital of Chicago) relative to a new sanatorium for indigent consumptives intended to care for the victims of the Great White Plague in Pasadena, along the same lines as such persons are cared for by the Barlow Sanatorium in Los Angeles. Dr. Stehman has been able to secure the cooperation of many of the good people in Pasadena and has been able to purchase a magnificent tract of 250 acres overlooking the San Gabriel Valley clear to the ocean, and on this large farm he has already erected buildings that will cost \$16,000.

So you see the good work goes on and the unfortunate poor who go down with tuberculosis are having a better and better chance to regain their health and again become useful citizens. The great need is education, education of the people at large, that they shall understand that every consumptive whom we take away from squalid environment will help prevent the infection of some fellow-citizen or friend or even perhaps a member of their own families. When this realization comes home to our citizens, as well as the proper conception of our humanitarian obligation to the poor consumptives themselves, then I am sure you will find your citizens will work with you heart and soul in furthering those municipal and semi-public projects and efforts that have for their purpose the solution of this important problem.

Tuberculosis is a menace to our beautiful State from one end to the other, and if this is to cease, it will come about largely through the efforts of organizations such as the Alameda Society and through the educational work which such societies will consistently and persistently carry on.

In Germany there are 99 public sanatoria for adult consumptives with 10,539 beds, besides 36 private sanatoria with 2,175 beds. In 18 sanatoria for children with tuberculosis there are 837 beds, a total of less than 13,000 beds. In the United States there are over 300 sanatoria with over 15,000 beds, showing that this country is in the lead in the Anti-Tuberculosis war. France has only 12 sanatoria for adult consumptives, with a total capacity of 148 beds. All of these institutions are private except the sanatorium at Agincourt.

The United States government operates three tuberculosis sanatoriums, one for soldiers and officers of the regular army at Fort Bayard, N. M.; one for seamen in the merchant marine, and others employed in coast service of the government, not in the navy, located at Fort Stanton, N. M.; and one for officers and enlisted men in the navy at Las Animas, Colo

Prof. Karl Pearson's theory that the first-born children of a marriage are more likely to fall victims to consumption than the latter-born offspring has been freshly tested by Prof. Van der Velden of Frankfort, from material furnished by Prof. Riffell of Karlsruhe, who shows from an investigation of 2,500 families that in normal families the fourth, fifth and sixth children are more liable to die of tuberculosis than are the first, second or third.

On the basis of 150,000 deaths yearly from tuberculosis, in the United States, the National Association for the Study and Prevention of Tuberculosis computes that there are 684,934 persons constantly sick with this disease. Allowing only \$300 as the average earnings of the workingman who dies, the annual loss to the country from the ranks of labor alone is over \$114,000,000 each year.



The Bulletin

OF THE

California Association for the Study and Prevention of Tuberculosis

A BI-MONTHLY PUBLICATION

George H. Kress, M.D., Editor.

(Entered as second-class matter at the Postoffice at Sierra Madre, Los Angeles County, California.

The aim of this publication is to promote the study and dissemination of knowledge concerning the prevention and cure of tuberculosis, to aid in the establishment of institutions intended for those purposes, and to co-operate with such organizations as can render aid in the solution of the tuberculosis problem.

This Bulletin appears in January, March, May, July, September, and November.

Subscription price, \$1.00 a year, which includes membership in the California Association for the Study and Prevention of Tuberculosis.

All members of local societies which are affiliated with the California Association receive the Bulletin without further cost.

Editorial Board consists of Dr. George H. Kress, Editor, Los Angeles; Dr. George H. Evans, San Francisco; Dr. Gayle G. Moseley, Redlands; Miss Annis Coffey, Sierra Madre, and Miss Gertrude Tucker, Sierra Madre.

Editorial contributions may be sent to the office of publication, care of Miss Gertrude Tucker, Manager, P.O. Box 141, Suffolk Ave. and Sierra Madre Place, Sierra Madre, Cal.

Notice Regarding Copy.—The Secretaries of local societies are expected to send reports of the work of their organizations to the Editor, Dr. George H. Kress, 240 Bradbury Building, Los Angeles, without further notice. Officers and members of the state and local societies are urged to forward communications that seem to them to be of interest and if means allow, the same will be published.

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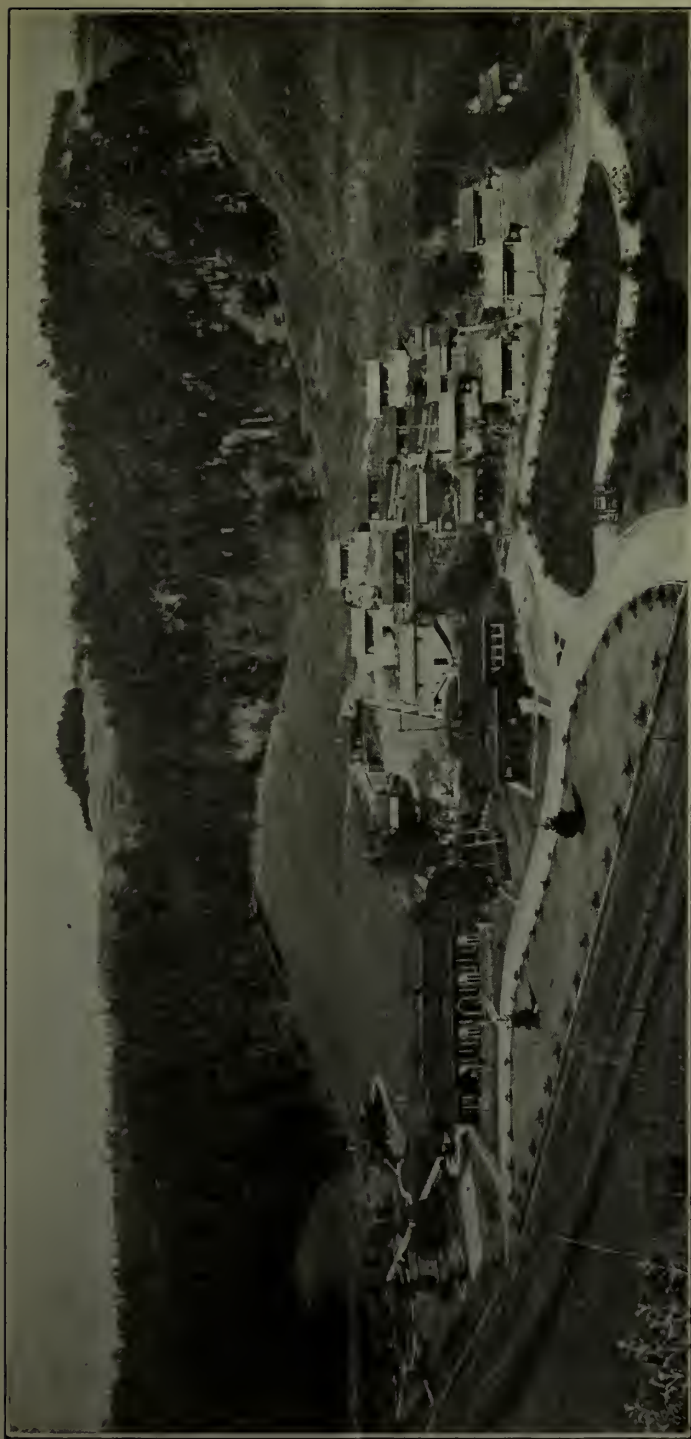
International Tuberculosis Association

National (U. S. A.) Association for the Study and Prevention of Tuberculosis

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GENERAL VIEW OF THE BARLOW SANITARIUM.



THE STYLE OF COTTAGES USED.

THE CHRISTMAS STAMP.

The sale of the Christmas Stamps of the Association was a success. The stamp was of value not only for the money it raised, but more than that because of the education of the people.

A sufficient sum was raised by the different affiliated societies which sold these stamps, to enable them to carry on their work to much better advantage than has heretofore been possible.

In most of the towns the idea was a new one, but with the experience gained this year, it should be possible to next year carry on a much more aggressive and also more successful campaign.

One of the indirect results of the Los Angeles campaign was the provision for a tuberculosis nurse by the City Council of that city.

A copy of the report form used by this nurse is printed in this BULLETIN, and any societies wishing copies can have same at cost of press-work and paper, provided the order is sent in at once, before metal is destroyed.

As is usually the case, it is difficult to promptly get all the returns from the merchants who had the stamps on sale. It is hoped to print a detailed financial report later on.

A CARD OF THANKS.

The Executive Committees of the State Tuberculosis Association and its affiliated societies herewith extend their thanks to all who lent their aid and support in the sale of the Christmas Stamp of the California Association for the Study and Prevention of Tuberculosis.

The money so raised will go far in helping to carry on the work and special efforts of the various Associations.

AN APPEAL TO THE CHURCHES OF CALIFORNIA.

April 24, 1910, To Be Devoted to Sermons on Tuberculosis.

The attention of our readers is called to the following important announcement just received from the National Association for the Study and Prevention of Tuberculosis:

CHURCHES ARE BEING ENLISTED IN CON-

SUMPTION CRUSADE.

Announcement of a national tuberculosis Sunday to be held on April 24 in 215,000 churches of the United States was made today by the National Association for the Study and Prevention of Tuberculosis.

Following campaigns against consumption that have been carried on in the churches of hundreds of cities, and sermons on tuberculosis that have been preached before thousands of congregations during the past year, a movement has been started to establish a *permanent tuberculosis Sunday*, on which it is hoped that every one of the 33,000,000 churchgoers in the United States will hear the gospel of health. *It is planned to enlist the active co-operation of anti-tuberculosis organizations, labor unions, fraternal organizations, and other bodies together with the churches in the movement.* The aid of leading churchmen in many of the principal denominations has already been offered. All of the large interdenominational bodies, such as the Young Men's Christian Association, the Young Women's Christian Association, the King's Daughters and Sons, and the various young people's societies are also in sympathy with the anti-tuberculosis campaign.

IT IS PLANNED THAT ON APRIL 24TH TUBERCULOSIS SERMONS SHALL BE PREACHED IN ALL THE CHURCHES OF THE

COUNTRY. Literature will be distributed to members of the congregations, and in every way an effort will be made to teach that tuberculosis is a dangerous disease and that it can be prevented and cured.

Clergymen who desire to obtain additional information in regard to tuberculosis will be able to secure literature from state and local anti-tuberculosis associations and boards of health, as well as from the National Association.

Our readers are requested to call the attention of clergymen to this meeting.

The State Association will attempt to send out literature to as many churches as possible.

As this copy of the BULLETIN will be sent to many ministers, leaflets number 2 and 8 are here reprinted. A perusal thereof will show that they emphasize the importance of eradication of the predisposing causes—the same factors which are responsible also for so large a portion of the sin and other misery of this world.

Tuberculosis will only be finally conquered when these accessory causes of overwork, underfeeding, overcrowding, vicious habits and previous diseases, all of which produce weakness and lowered vitality, which predispose not only to physical diseases, but to lowered moral tone as well, are in part eradicated.

No better service could be done the people of this State than to call attention to some of these facts.

THE BARLOW SANATORIUM OF LOS ANGELES.

In this issue of the BULLETIN is printed a short sketch of the Barlow Sanatorium of Los Angeles. In its short career this institution has made for itself a most enviable record, as a perusal of the brief sketch will indicate. The institution demonstrates in a striking manner what the enthusiasm and loyalty of a group of interested people can do.

THE REDLANDS SETTLEMENT.

No less interesting than the Barlow Sanatorium is the Redlands Settlement, and we are glad to be able to show photographs of this institution in the current BULLETIN.

In subsequent issues we hope to present a description of other institutions in the State.

SOME LETTERS FROM LAYMEN REGARDING THE CHRISTMAS STAMPS.

A few of the letters received from laymen, to whom were sent some of the Christmas Stamps of the Association should be of interest.

Dear Doctor:—I inclose 50 cents. Surely this is a case of the "Widow's Mite." With best Christmas wishes.

* * *

I cheerfully respond to your request and only regret my inability to do more to further the interest of an institution that aims to relieve the sufferers of this terrible malady. Very sincerely.

* * *

Dear Sir:—Inclosed is check for 50 cents for stamps sent to me. It is with pleasure I inclose this very small amount toward helping an excellent line of work. Respectfully.

* * *

I had already purchased a stock of these charming stamps, but gladly inclose the modest 50 cents for more. Very cordially.

* * *

Dear Sir:—I thank you so much for sending stamps. I am glad to help on this worthy cause. I will send for more as soon as I need them. I believe we all should help the unfortunate. Respectfully.

* * *

Dear Doctor:—Your favor inclosing 100 charity stamps at hand. This is a good work you are engaged in, and I take pleasure in inclosing my check for one dollar to cover the charge of same. Yours very truly.

Inclosed please find my check for \$1 for Christmas stamps. Thanking you for the privilege of subscribing to so worthy a cause, I remain, respectfully,

* * *

Dear Sir:—Inclose you check for 100 stamps. Glad indeed to assist and co-operate in the good cause. Yours truly.

* * *

My Dear Doctor:—A few days ago you sent Mrs. ——— at No. 620 St. Paul avenue a package of stamps under your number of A357, charges for which were 50c. I feel very much slighted to think that you have neglected me, so I am inclosing \$5. Send me \$4.50 worth of stamps and credit Mrs. ——— with the balance. Wishing you lots of success in the good work, I am, with kindest regards, sincerely yours.

* * *

Dear Sir:—Let me thank you for calling my attention to this way of co-operating in your splendid work. Inclosed please find my check for one dollar. Wishing you success, and with the compliments of the season, I am, yours cordially.

* * *

Dear Sir:—Inclosed check \$1 payment of stamps. Your cause certainly is a good one and I wish you all success. Yours truly.

* * *

Dear Sir:—Inclosed please find check for 100 California Charity Stamps, recently received. Let the good work go on. Very sincerely yours.

* * *

Dear Sir:—Yours containing 100 California Charity Stamps received. I regard the work you are doing for indigent consumptives as the very highest type of charity, and though just now I am rather hard pushed for ready money, I can spare a dollar for so worthy an object. I inclosè my check for one dollar for the 100 stamps sent. Yours most truly.

ALAMEDA COUNTY SOCIETY.

In every way the progress of the Society in Alameda county is most gratifying to those interested in the campaign against tuberculosis. The admirable work of Miss A. F. Brown, chairman of the Stamp Committee in placing the Christmas stamps, has resulted in the Society's exchequer benefiting wonderfully, while there is now in course of promotion a society Kirmess under the auspices of the various county ladies' clubs, headed by the Ebell, which bids fair to give sufficient funds to the organization whereby a free clinic can be instituted and maintained in the poorer and more crowded section of the city.

The efforts successfully put forth by the Ebell members under the supervision of Mrs. Chas. L. Smith, treasurer of that society, have added within the past month one hundred and fifty members to our list. This, however, is in a measure the least part of their work. An interest in the campaign has been excited that means a great deal towards the ultimate success of the practical working of the society. Influence has been secured which will insure hearings in public matters, and it is felt generally that hereafter when the Society sees the need of an active entry into some open public question, there will be, behind the officers, the influence, opinion and backing of the entire ladies' club membership of Oakland and Alameda county.

Dr. Florence Sylvester as chairman of the Public Meetings Committee has been indefatigable in her work of assisting in the promotion of the Kirmess and a benefit to be given by the Judean Society at a local theater Feb. 25th the financial returns from which will be turned over to this organization.

Dr. E. A. Majors, chairman of the County Hospital Improvement Committee, has successfully laid before the Board of Supervisors plans for ten four-room tuberculosis cottages which

the Board has consented to erect at the County Hospital, where at present thirty-six indigent consumptives are being *uncared* for in makeshift tents without a single convenience or accommodation.

The Board of Education, too, have been more than generous to the Society, and have consented to allow the Public Education Committee, of which Dr. A. A. Alexander is chairman, to outline and deliver a series of talks before the teachers and pupils on tuberculosis, its prevention and cure.

Requests to the Society for talks by its professional members and officers have been promptly met by First Vice-President Dr. Edward von Adelung, who has addressed a number of the more influential ladies' clubs lately with great success.

Owing to the increase of interest in the Society and the consequent growth of its executive affairs, it has been found necessary to remove to more commodious offices in the First National Bank building. Through the courtesy of President P. E. Bowles and Vice-President L. G. Burpee of that institution, a substantial donation by a reduction of the ordinary rents charged for offices in this magnificent building has been made which means much to the finances of the Society.

In every way the interest and generosity of the local business community in the Society's work has been evidenced daily. Not one member of the community has yet been found who has failed to assist in the work, either by influence or through donations or active work. The policy of the present officers is first to build up financially to a point where funds to carry on the work can be relied upon without annoyance. With this important end accomplished, material matters, the active prosecution of improvement in local conditions, the care of indigents, and the enforcement of legislation necessary to better the general public

health, can all be fought for with concentrated and undivided attention.

Information as to conditions in other localities and successful methods pursued by other similar organizations will be welcomed by local officers, to serve as a guide in the campaign when it is well under way. The problem of open-air schools is one with which a committee will shortly be grappling, as also the institution and operation of a free clinic. With the latter the professional members of the Society are well equipped to contend, although suggestions from other communities which have been successful along these lines will be warmly welcomed.

Samples of literature issued by other societies will also be gladly received and exchanged with a view to furnishing suggestions that may prove mutually beneficial.

There is no question that the feminine influence in the campaign is one of the most important requisites for success. Locally this has been demonstrated by the rapidity with which the Society has grown since the enlistment of sympathy and activity on the part of the various woman's clubs. The help accorded to the Society here by the Ebell members is incalculable, while the results accomplished by Miss A. F. Brown in the sale of the Christmas stamps and Dr. Florence Sylvester in educational and public meeting matters demonstrates indisputably the power that women can and do wield in reform work of this character.

KENNETH A. MILLICAN,
President.

N. B.—Please note that Miss Bertha Knox has been elected secretary to succeed Dr. R. O. Moody, resigned. Dr. Moody merely accepted the secretaryship temporarily pending the success of the Society in finding a layman who would accept the office

Alameda, Dec. 18, 1909.

To the Editor:

DEAR SIR AND FRIEND:—As editor of THE BULLETIN, and as a fellow-worker in the California Association for the Study and Prevention of Tuberculosis, I take this liberty of addressing you and the readers of our State publication in reference to a very important work carried on in the public schools of Alameda by the local branch of our County Society.

You are perhaps familiar with the recent organization of the Alameda City Auxiliary to the County Society. In addition to the regular methods commonly practiced for disseminating knowledge and imparting instruction to the general public for the purpose of checking the inroads of tuberculosis we have hoped to accomplish much by enlisting the co-operation of the several civic organizations as well as the Board of Health of our city.

Through the suggestion of Dr. W. O. Smith, who has been largely instrumental in the organization of the Auxiliary, a proposition was made to the Board of Education that permission be given to carry on a series of lectures or talks before the pupils of the grammar grade and high school, bearing on the general hygienic conditions necessary to the avoidance, checking and cure of tuberculosis. The members of the Board of Education and the Superintendent of Schools heartily endorsed the plan, and arrangements were made for carrying it out immediately.

A number of local physicians were assigned to the schools and appeared before the assembled classes in each, talking for about half an hour or so, handling the topic as they individually preferred. The first of these talks has been given in each school, arousing enough general interest and favor to merit continuance.

The general plan of the talks embraces the hygienic features of light, warmth, fresh air, cleanliness and sanitation so treated as to cause the child

of the grades to realize the importance of bodily care and proper living. Later the specific disease of tuberculosis is touched upon—its contraction, nature, effect on the body, with its possible prevention and cure. These talks can be so handled that the invidious habits, so frequently contracted by the adolescent youth, can be touched upon in warning with great effect. It is hoped that finally talks may be given to the boys and girls of the high school, separately, upon subjects of vital importance to the health of the sexes.

After all is said and done, the race will not be rid of this dread disease and others of kindred origin until the coming generations banish it from our midst through proper living.

The accomplishment of this result is an educative process, requiring patience and perseverance. Where can we begin so profitably as in the schools; and even here to overcome the common apathy so generally displayed toward these matters by parents and children, the classroom teacher's work must be supplemented and driven home through outside assistance. Medical inspection will assist immensely, but it certainly behooves a community to carry on an educative campaign for physical and moral health by every means in its power. Very truly yours,

FRED H. KRUSE,

Secretary of the Alameda City Auxiliary to the County Society.
2200 San Antonio Ave.,
Alameda, Cal.

EIGHTH ANNUAL REPORT OF THE REDLANDS SETTLEMENT.

**A Sanatorium for the Treatment of
Tuberculosis—Founded by Henry
B. Ely of New York City.**

Officers—Dr. Gayle G. Moseley, President; W. R. Cheney, Vice-President; H. L. Graham, Second Vice-President; A. N. Dike, Secretary; Miss M. L. Witter, Treasurer.

Directors—Dr. Gayle G. Moseley, H. L. Graham, Miss M. L. Witter, Dr. C.

E. Ide, W. R. Cheney, Rev. Fr. T. J. Fitzgerald, J. B. Glover, A. N. Dike, W. F. Holt, J. J. Suess, Rev. C. F. Blaisdell.

Medical Staff—Dr. Gayle G. Moseley, Medical Director; Dr. Wm. A. Taltavall, Pathologist; Dr. Hoell Tyler, Dr. W. B. Power, Dr. C. E. Ide.

Superintendent—Mrs. Julia A. Spow-art.

From the Eighth Annual Report of the Redlands Settlement we quote as follows:

The great campaign of education in regard to tuberculosis which is going on all over the world is beginning to produce results.

The individual who has lived in a sanatorium has not only been taught to care for himself, but has learned how to prevent infecting others.

IMPROVEMENTS.

Through the liberality of our friends we have been able to make many improvements the past year, one of the most important being the *erection of a double tent-house for women patients*, which was donated by *Mr. G. S. Myers* of this city, who has done much for the institution. The complete furnishings of this building were given by *Miss Clara Recktenwald*.

The Baptist Church donated a *modern bungalow tent*, which is somewhat larger than the old ones. We have in hand the funds for the erection of *two additional bungalow tents*, one the gift of *Mr. Charles Putnam*, the other donated by the *Elks Lodge* of this city.

It was thought best by the *Directors* to purchase an additional plot of land of about six acres which lies between the Settlement and the main road. This land cost \$600 and was paid for out of a \$2000 legacy to the Settlement by the late *Daniel Cotcher*.

PROPOSED IMPROVEMENTS.

It is the desire of the management to extend the work and field of usefulness of the Settlement as much as possible. An institution cannot stand still; it

must either progress or go backward. Through the generosity and interest of kind friends, this institution has been able to make some improvements and additions to its facilities for caring for patients each year. While not having funds to make all the improvements and additions we would like, yet we have every reason to be thankful to a generous public and a number of individuals who have taken a deep personal interest in the work. *The Directors hope to extend the scope of the work by providing accommodations on the Settlement grounds in buildings some distance removed from the present ones, for patients who are in the early stage of the disease and who are able to pay a moderate sum for their maintenance.* It is the firm conviction of the management that it is as much our duty to care for these people who are able and willing to pay a moderate sum, yet who cannot afford a high-priced sanatorium and who are not objects of charity, as it is to care for those who are practically destitute. For various reasons it is difficult for this class of people to get the proper care in their homes or boarding houses. It is the opinion of all who have had considerable experience in tuberculosis work that one of the greatest needs is moderate-priced sanatorium treatment.

To carry out this plan the first thing necessary would be the *erection of a substantial administration building*, and later as the work grows accommodations could be added as necessary. It is hoped that some friend or friends will make the erection of such a building possible.

The Board of Directors are anxious to be guided as far as possible by the desires of the members of the Settlement and friends who support this work, and to this end the President of the Board of Directors would be glad to receive any ideas or suggestions from those interested.

The proposed plans do not contemplate any change in the work of the

Settlement as now carried on, as far as the charitable work is concerned, but it is the hope to extend the work so as to help a greater number. Later more elaborate accommodations can be added for those who can pay a higher price. All profits from the pay patients would be used in building up the institution and in caring for those who are in an advanced stage of the disease and no longer able to help themselves.

FINANCIAL.

The *City and County allowances*, aggregating \$900, were continued during the year. We have been able to *produce many of our own vegetables*, and all of the poultry and eggs.

The *expense per week of maintaining a patient* was \$11.27. In this estimate the depreciation of buildings, etc., is carried as part of the cost of caring for the patients. Leaving out this item, the *cost per week* was \$9.73, a slight increase over former years.

The *Endowment Fund*, amounting to \$7000, is invested in a 7 per cent. first mortgage on improved real estate within the city.

Our *total assets* amount to \$16,411.98, and we have no liabilities.

STATISTICAL REPORT.

The statistical report shows that we have *treated during the year forty-one patients*. Of the forty-one patients treated, twenty were improved, eight were unimproved, and fourteen died; four of the deaths occurring within two weeks of admittance.

The percentage of deaths was 34.14 as against 37.50 per cent. last year.

As this institution is supported wholly by donations, we have adopted a rule for the *protection of local interests*, governing the admission of patients as follows: No one will be admitted as a patient to The Settlement who has not resided in the State of California for at least six months preceding his application, and in the City of Redlands for at least sixty days—unless said patient pays all expenses incurred on his behalf. *We do this in*

order to avoid attracting a class of indigent invalids to Redlands.

Generous friends have kept us supplied with clothing, books, preserves, and all sorts of eatables; records for the talking machine, bedding, rugs, medicines and surgical appliances; flowers, Christmas presents and delicacies for the patients. We thank them all. The names of these donors are appended, but the list of donations is so long we omit specific mention of them.

MEMBERSHIP DUES.

Annual membership dues are now payable for the year 1910. Anyone who sends us \$5 is enrolled as an annual member, and any sum in excess of that is credited as a donation. All amounts, no matter how small, help us and give the senders a personal interest in The Settlement. Life memberships are \$100. All receipts from this source, and all donations so specified go into our permanent funds.

All money should be sent to Miss M. L. Witter, Treasurer, Box 317, Redlands, California. Anyone interested in the Annual Report can have a copy of it by applying to the Secretary, Mr. A. N. Dike, Redlands, California.

THE BARLOW SANATORIUM OF LOS ANGELES.

An Institution for the Treatment of Poor Consumptives.

The BULLETIN in this issue presents a brief account of the work being done by the Barlow Sanatorium of Los Angeles, in its work for indigent consumptives.

This institution and the Redlands Settlement are the pioneer organized efforts in anti-tuberculosis work in the State of California. It was incorporated on April 28, 1902, completing its first buildings and receiving its first patient on September 1, 1903.

Its organization preceded that of the Southern California Anti-Tuberculosis League, which was the seventh anti-tuberculosis organization of its kind

and which was later merged into our present State Association. The Southern California Anti-Tuberculosis League was organized on December 3, 1902, at Pasadena, Cal.

The founder of the Barlow Sanatorium was Dr. W. Jarvis Barlow, the present Dean of the Los Angeles Department of the College of Medicine of the State University, he and his family having given the first \$20,000 with which to purchase grounds and erect buildings, and he himself in these intervening years having borne the brunt of the upkeep of the institution.

The half-tone photographs which are printed in this issue give an idea of the present development of the institution, but only those who have been directly interested in its welfare can appreciate the many obstacles which had to be faced, but which, through the devotion and steadfast loyalty and generosity of the founder, his associates and the good people of Los Angeles, have thus far been successfully overcome.

The editor quotes from a paper written by himself for the *Southern California Practitioner* in December, 1905, as it gives a brief historical survey of the institution and then presents some excerpts from the last annual report of the institution.

The work done has been of a pioneer character and the problems solved are those which confront all undertakings of this kind. It seemed wise to go into some descriptive detail in order to make the article valuable to organizations which might have somewhat similar plans in mind.

The Barlow Sanatorium, a Los Angeles charitable institution for the treatment of incipient tuberculosis, was incorporated in 1902, and received its first patient September 1, 1903. The institution was so named by the Board of Directors out of recognition of the generous thought and financial aid, given by the founder of the sanatorium, Dr. W. Jarvis Barlow, and his family.

The site of the institution is a tract of twenty-five acres of land within the city limits, located in a beautiful little valley in the Chavez Ravine, just to the south and bordering on Elysian Park, within the city limits of Los Angeles. The Hollywood and Colegrove cars which pass along Sunset Boulevard, make the Sanatorium quite accessible.

The idea of a sanatorium where indigent consumptives of Los Angeles, who were still in the curable stages of the disease, could obtain the advantages of the open-air treatment and so be given a fair chance of recovery, suggested itself to the founder of the institution several years ago; for the hopeless condition of the scores and scores of poor consumptives who reside in Los Angeles and the unsatisfactory and insufficient arrangements for their care and treatment had impressed the need of a proper institution for the treatment of these unfortunate people upon Dr. Barlow, as it has upon all who have ever taken the pains to investigate this problem.

Recognizing that little or no aid was at that time to be obtained from county or city, and yet deeply stirred by the sad lot of these unfortunate victims of the great white plague, Dr. Barlow decided to turn to his friends for aid and with and through them to establish, if possible, a Los Angeles institution where such work as that instituted by Dr. Edward Trudeau at Saranac Lake, New York, could be carried on, to the direct benefit, on the one hand, of the poor consumptives, and on the other, of the city as a whole.

After careful thought and investigation of desirable sites, the twenty-five acres in the Chavez Ravine already referred to was decided upon by Dr. Barlow, as being the most desirable and most conveniently located situation, and as soon as an opportunity offered, he secured an option on this land, which was purchased for \$7300 from Mr. J. B. Lankershim, this sum being donated by

Dr. Barlow, who gave \$5000 thereof, Mr. Alfred Solano, who gave \$1300, and Mr. J. B. Lankershim, who gave \$1000.

The Administration Building was erected and equipped at a cost of \$5377 by Mrs. W. Jarvis Barlow, and the Solano Cottage or Infirmary was built and equipped at a cost of \$9352 by Mr. and Mrs. Alfred Solano.

At the Barlow Sanatorium patients receive free, treatment that cost \$25 per week and up in private sanatoriums. Patients who can afford to do so, are, however, requested to pay \$5 a week, as in that way, the benefits of the open-air treatment can be accorded to a much larger number of patients. As the actual cost of maintenance of the institution is about nine to ten dollars per week for each patient, this leaves a deficit of four to five dollars per week to be made up by the institution.

The annual reports allow one to obtain a fair idea of the work thus far accomplished. In the first year of the institution's existence, ending August 31, 1904, a total of 34 patients were treated, of which number when admitted, two were in the incipient, 17 in the advanced, and 14 in far advanced stages. Upon discharge from the institution, 14 were considered improved and one doubtful. There were 8 deaths. During the year ending August 31, 1905, there were discharged as apparently cured some 4 patients, as improved some 16 patients, as unimproved some 8 patients. There were 16 deaths for the second year.

When the large proportion of patients who are admitted in advanced stages of the disease is taken into account, these results may be considered very encouraging. Circumstances over which the institution has had no control, have made it necessary, in a number of instances, to admit patients whose condition gave not even the faintest hope of improvement. With only one other hospital in Los Angeles, the County Hospital, admitting patients

suffering from pulmonary tuberculosis, it is easy to understand why there is at the present time a waiting list of almost one hundred persons who are worthy and in need of the open-air treatment as carried out at this institution.

The funds for running expenses for the Barlow Sanatorium are raised through dues, donations and entertainments. Fifty citizens, each of whom gave \$100, entitling them to life-membership in the institution, were the means by which the first two beds were endowed. For the endowment of the second bed \$4300 has so far been raised.

Such a sanatorium as the Barlow is the means not only of directly curing a certain number of consumptives, but saves other lives by the prevention of infection through the withdrawal of dangerous infective foci from faulty environments. In addition, the institution is a valuable factor in spreading among the people at large, knowledge concerning proper means of prevention and treatment of the great white plague.

The grounds, buildings and equipment, the large number of faithful friends and workers and the excellent results already attained among the patients, not only make the Barlow Sanatorium an interesting institution, but make it worthy of the thought and generosity of every citizen in Los Angeles. Medical men especially, who know the value of the open-air life, can aid the Barlow materially by spreading the knowledge of its good work among their friends. Physicians are at all times welcome at the institution and the officers are always glad to give such information concerning the institution as is at their command, to all who may be interested therein.

The tuberculosis problem of Los Angeles is not imaginary. It is real, very real, and unless steps be taken soon, to get the situation better in hand than at the present time, there can be no doubt but that there will be an increase in the morbidity from the great white

plague, among native born and among such citizens as come here free from any taint of the disease.

The statistics which warrant the above statements have been fully presented before our County Medical Association. It is not improbable that 50 per cent. or more of the tuberculosis morbidity in Los Angeles is to be found among persons who are virtually penniless and who, therefore, must live in the crowded, cheaper lodging and eating-houses of the city, precisely the environment most favorable to the infection of a large number of other persons.

The Barlow Sanatorium with its equipment of more than \$97,000, stands ready to withdraw a large number of these afflicted persons from these faulty surroundings.

From the last annual report the following extracts are taken:

SIXTH ANNUAL REPORT OF
THE BARLOW SANATORIUM
FOR POOR CONSUMPTIVES.
LOS ANGELES, CAL.

DIRECTORS, 1905-1909: Mr. James Slauson, President; Mrs. John D. Hooker, Vice-President; Norman Bridge, M.D., Mrs. Alfred Solano, Mr. R. W. Poindexter, Mr. Dan Murphy, W. Jarvis Barlow, M.D., Secretary and Treasurer; Miss Elizabeth Wolters, Assistant Secretary.

ADVISORY BOARD: Rt. Rev. Thomas J. Conaty, Dr. H. G. Brainerd, Mr. C. C. Desmond, Mrs. E. T. Earl, Dr. Milbank Johnson, Mrs. Enoch Knight, Mr. W. G. Kerckhoff, Rt. Rev. J. H. Johnson, Mrs. Hugh Macneil, Mrs. Randolph Miner, Mrs. J. H. Norton, Mrs. Milo M. Potter, Mr. A. Ramish, Miss C. E. Thomas, Mr. J. S. Torrance.

Los Angeles, Cal., September 1, 1909.
To the President, Directors and Advisory Board of the Sanatorium:

Ladies and Gentlemen: The Sixth Annual Report, finishing *six years of work for the needy tuberculous*, is here

presented to you. It is with a feeling of pleasure and deep gratitude to the friends who have helped us that I give you a brief review of the year's work, the improvements that have taken place through the generosity of those who wish to help others, and the liberal sums that have been added to our endowment.

The Sanatorium has cared for this past year as high as thirty-eight cases. *The average number of cases treated* at the Sanatorium for the year is 33.1. *The average cost per patient* per week was \$8.37, *exclusive* of all permanent improvements and donations of supplies. When it is possible for us to care for fifty patients, I believe we will have this cost down to \$7.50 or less.

There are now *forty-four available beds at our institution*, and the same number of patients could be taken care of if we had sufficient means and enough cases in the early stages to fill the cottages on the hillside. The beds of the Infirmary and lower cottages have been pretty constantly filled, as there is always a waiting list of advanced cases.

The institution, I believe, has a good name in Southern California, and I hear indirectly from many sources that the friends of our patients are pleased with the care that is given them at the Sanatorium. We have adhered strictly to the rule of caring only for cases that need help, and whenever possible receiving \$5.00 *per week for their maintenance*, providing everything for them, including the laundry.

Ninety-two cases have been treated during the past year, which is five more than the previous season, and this also when the average stay at the Sanatorium has been longer and the results of treatment more favorable. As it has been proven in the past, there is no doubt that the longer we can keep a case that is doing well the more certain the cure.

I have been much troubled in the past year to find *suitable employment*

for cases that have reached the time to leave us, and rather than have them return to the unfavorable conditions from which they came, we have kept them longer than would be necessary if suitable employment could be obtained.

The most successful improvement that we have made this past year has been the securing of an excellent *Resident Physician*, Dr. Robert L. Cunningham, of Johns Hopkins Hospital, who has proved this past year all that a Resident Physician could.

With regard to our *income for making up the deficit*, it has been lessened by the sum from Annual Memberships and Yearly Subscribers, but through donations to the Endowment Fund, the interest has increased, and on account of having no entertainment in the past three years, it has been necessary this year—the first time since we began—to use our interest money for the running expenses. Heretofore, we have been able to place this money in the Endowment Fund.

A detailed account of the *Special Subscription List*, amounting to \$15,440.88, which was raised instead of having a Garden Fete, is given on another page; \$11,250 went to the Endowment Fund and only \$3390.88 to the running expenses. This will, however, prove a benefit to the future of the institution, but makes it a little harder to run at the present time. It has increased our *Endowment* to \$47,267.89.

Present Needs: Having accommodations for forty-four patients with insufficient money to fill all beds, we need donations toward running expenses or amounts added to the Endowment Fund. I believe it would be better not to have any more cottages built this year, but strive to meet the following necessities:

First—Any donation toward the running expenses.

Second—Life Memberships (\$100.00), which go to the Endowment Fund; patrons, at \$50.00 yearly; yearly sub-

scribers at \$10.00 and upwards; annual members at \$5.00 per year.

Third—Endowed beds. \$5000.00 will endow a bed for all time, or any one may keep a patient in a bed at the rate of \$5.00 per week, which includes all expenses.

Fourth—A separate living-room for amusement purposes.

Fifth—Bolts of cheese cloth, which is used as handkerchiefs by all patients and then burned.

Sixth—Donations of canned and fresh fruit, or any necessary household supplies and wearing apparel.

MEDICAL REPORT.

Total number admitted in 6 years	359
Number of patients treated Sept. 1, 1908, to Sept. 1, 1909	92
Number of patients at Sanatorium Sept. 1, 1909....	26
To be reported.....	66

66 Cases to be Reported:

Men	43=65.1%
Women	23=34.8%
	66

Condition Clinically and by Stages (Turban) on Admission:

Incipient, Stage I.....	
Moderately advanced, Stage I	10=15.1%
Moderately advanced, Stage II	40=60.6%
Moderately advanced, Stage III	2= 3%
Far advanced, Stage III....	14=21.1%
	66

Condition of Patients When Discharged:

Patients apparently cured..	2= 3%
Patients with disease arrested	8=12.1%
Patients improved	28=42.4%
Patients unimproved, disease progressive	16=24.2%

SUMMARY. (After L. Brown) Modified. 66 Cases. Sept. 1, 1908 to Sept. 1, 1909

Patients not staying for treatment (less than 30 days) 7=10.3%
Patients who died in Sanatorium 5= 7.6%

ASSETS.

The Sanatorium, entering on its seventh year of active work, is found free from debt of any kind, all bills and accounts settled, with the following assets:

25 acres of Land (original cost)	\$ 7,300.00
Improvements to Land.....	8,000.00
Administration Building (furnishing and improvements)	7,976.88
Solano Cottage (furnishing and improvements)	12,515.20
Medical and Dental Students' Cottage and improvements	343.04
Potter Bazaar Cottage and improvements	458.53
Hugh Macneil Memorial Cottage and improvements.....	600.00
Garden Fete Cottage No. 1....	391.79
Garden Fete Cottage No. 2....	732.98
Hebrew C. R. Association Cottage No. 1.....	462.12
Hebrew C. R. Association Cottage No. 2.....	457.37
La Lomita Cottage.....	452.62
Booth Memorial Cottage....	457.22
Al Malaikah Mystic Shrine Cottage	440.94
Milbank Johnson Cottage....	537.88
Native Sons of the Golden West Cottage No. 1.....	490.30
Native Sons of the Golden West Cottage No. 2.....	476.26
Laurence Milbank Memorial Cottage	904.49
St. Vincent de Paul Cottage....	698.89
Saint Bernardine Cottage.....	701.46
Resident Physician's Cottage...	1,467.47
Help Cottage	250.00
Summer House	50.00
Stable	311.50
Horse and two vehicles.....	150.00
Laundry	614.00
Crematory	200.00
Chickens	100.00
Endowment Fund, Invested....	46,870.00
Cash in Savings Bank for Endowment Fund	397.89
Cash on hand.....	2,805.91
Total	\$97,615.04

CLASS	Physical Signs Turban	T. R. found at any time	Hygienic-dietetic Treatment, Without Tuberculin. Patients who stayed over 30 days. Average Residence 202.1 Days.										Hygienic-dietetic Treatment with Tuberculin. Patients who took Tuberculin more than 30 days. Average Residence 207 Days.																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																															
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1. Pt. II Progr. Tou 2 doses, 11 dis.
2. Pt. II Impr. Tou. 9 doses 63 dis.
X = positive. O = negative.

The Tuberculosis [Consumption] Problem.*

WHAT TEACHERS SHOULD KNOW ABOUT IT.

Why a World-Warfare Is Being Waged Against Tuberculosis.

Pulmonary tuberculosis, known also by the names of consumption and the great white plague, is responsible for one out of every five to ten deaths.

It has been estimated that the world annually offers up more than one million lives to this disease, two deaths occurring every minute.

In the United States, the death roll from tuberculosis every year means the loss of more than 150,000 citizens.

Most of these deaths (about 90 per cent) are adults. The economic loss represented by these deaths means an annual deficit to this country of more than three hundred million dollars. In addition to this vast loss of money to the nation, there is the suffering endured by the victims of the disease and the sorrow of bereaved and often of dependent families.

All this vast amount of death, treasure, suffering and sorrow is occasioned by a disease that can be prevented. The deaths of these citizens and all the loss that goes therewith are therefore altogether and entirely unnecessary!

Is it any wonder, then, that the civilized world has at last awakened to its responsibilities in this almost greatest of all public health problems and is determined to exterminate this widespread and unnecessary disease?

The basic facts essential to prevention and cure have been discovered. The task before the world is the application of this knowledge. The call to arms for battle with this great scourge has gone forth to all civilized nations and peoples.

The members of the teaching profession will have an almost sacred part to bear in that warfare.

The Important Role of Teachers in the Warfare Against Tuberculosis.

Teachers will have a tremendous influence in the fight against tuberculosis, because the successful eradication of the disease will depend in good part upon the extent to which the rising genera-

tion of citizens are taught concerning its prevention and cure.

What Is Tuberculosis?

Tuberculosis is a disease usually affecting the lungs (although bones, glands and other tissues are not infrequently attacked), and which runs most often a slow course of weeks, months or years, being characterized by cough and other pulmonary symptoms with gradual loss of weight and strength and the presence of certain constitutional symptoms.

The Causes of Tuberculosis.

In 1882, Robert Koch of Germany proved that tuberculosis belonged to the class of germ or infectious diseases by discovering the particular or specific germ that must always be present in the body afflicted with this disease. This germ because of its rod-shape is called the bacillus tuberculosis.

Since then has been proven also that the predisposition to the disease exists in those persons whose health for any reason is below normal. In other words, the old idea that tuberculosis was hereditary has been shown to be an error. The most that can be inherited is the predisposition, namely, a weakened body, and a weakened body is far more often acquired than inherited.

The Specific or Germ Cause of Tuberculosis.

The specific or exciting cause of the disease is the micro-organism or germ or bacterium known by the name of the bacillus of tuberculosis. This bacillus is so small that ten thousand placed end to end make only a single linear inch.

Like other bacteria it is a member of the plant kingdom. This particular germ belongs to the class of parasitic plants. In common with other plants it grows best in soils adapted to its needs. The soil it seems to prefer above all others is the lung tissue of a person whose health or resistance is below par.

The bacillus of tuberculosis is spread broadcast because a single consumptive

*This is Educational Leaflet number 2 (For Teachers) issued by the California Association for the Study and Prevention of Tuberculosis. Single copies, one cent each. Larger lots, prices on application. Office of the Association, 240 Bradbury Bldg., Los Angeles, Cal.

This leaflet received the silver medal in the competitive leaflet exhibit at the International Congress on Tuberculosis, Washington, D. C., September 21st-October 12th, 1908.

can cough up in twenty-four hours sputum containing not millions but actually several billions of germs. Under present conditions the care of this sputum is often neglected and as it dries into dust, the germs are blown hither and thither to contaminate not only the air that is breathed but to get on things that are handled or eaten.

Types of this germ are also found among certain of the lower animals, where they also produce forms of pulmonary tuberculosis. Those found in dairy cows are particularly a menace, since milk is a good medium of transmission.

Predisposing Cause of Tuberculosis—

A Weakened Body.

Through the discovery of the bacillus of tuberculosis and the elimination of the theory of hereditary transmission must disappear also much of the fatalism with which tuberculosis has been accepted by many persons.

The general groups into which the predisposing causes fall may be said to be bodily weakness or lack of resistance resulting either from hereditary enfeeblement, over-work, under-feeding, previous diseases, vicious habits, over-crowding or general unhygienic mode of living.

Many infants are born weak. Unless such children can be developed physically, they are apt to give but feeble resistance to disease.

Over-work, mental or physical, whether from necessity or from choice, through the bodily fatigue and weakness induced, is responsible for many infections from tuberculosis. Certain occupations also, like those with irritating dusts, frequent temperature variations, confined positions and so on favor the production of bodily or pulmonary weakness.

Under-feeding, whether from insufficient or improper foods, is another factor responsible for much bodily weakness.

Previous diseases—and particularly in childhood, measles and whooping-cough, and later in life, grippé—often induce a lack of resistance, which through neglect, or in adult persons by too early return to work, place such persons in excellent receptive condition for infection.

Vicious habits, particularly over-indulgence in alcoholic drinks, to the neglect of good food, often results in lowered health and predisposition to tuberculosis.

Over-crowding is a far too frequent cause in the production of weakened bodies. Workshops, school-rooms, and homes seem often to be constructed to keep air out rather than to let it in. In many rooms, persons are crowded into

a limited air-space with almost utter disregard to ventilation. To breathe vitiated air is at all times harmful. An impression prevails also that night air is harmful and that open windows at night are dangerous. This is the contrary of the actual facts. Outside night air is almost invariably more pure than that of a closed room in which the oxygen is being consumed by human beings, lamps or gas.

The Changes Produced in the Lungs

by the Germ.

The bacillus tuberculosis is a parasitic plant which in pulmonary tuberculosis feeds on the lung tissues. At the same time it casts off substances which not only lessen resistance locally, but which, when they get into the blood and circulation, are largely responsible for the symptoms of the disease.

When the germs get into healthy lungs, even though they gain a foothold, they are usually overcome by the tissue cells and fluids.

But when the germs get into the lungs of persons whose health or resistance is below normal, the germs often gain the victory. The elementary change produced in the lung tissue is a little nodule about the size of a pin's head called a tubercle. This tubercle can break down into an ulcer or small abscess. If many such be near together, a cavity may be formed.

In healing or curing the tubercles, ulcers and abscesses are replaced in whole or in part by ordinary scar tissue, such as that by which wounds on the surface of the body are repaired.

The Symptoms of Tuberculosis.

The difficulty of early recognition, combined with the mildness of the discomfort in the early stages, are the factors largely responsible for neglect of this disease by its victims, until a time often so late as to not give much real chance for recovery.

In the beginning all that may be evident is a tired feeling or a tendency to fatigue after work, some variation in appetite, some slight loss of weight and an irregular cough of somewhat obstinate character.

Later on, the loss of weight and cough may be increased, much sputum may be expectorated, fever may be noted, night sweats may occur, and there is increasing weakness.

Still later may be shortness of breath, with accentuation of the above symptoms and with or without hemorrhage or other complications. In this third stage is met the typical emaciated, weakened, coughing consumptive.

The Two Fundamental Facts in the Prevention of Tuberculosis.

These are two, being dependent upon the two causative factors.

The first implies the destruction of the germ.

The second implies the strengthening of the weakened body.

The Destruction of the Bacillus of Tuberculosis.

Most consumptives acquired the disease from other consumptives and this because the latter failed to destroy their sputum, for it is through the sputum of consumptives that tuberculosis is almost exclusively spread.

The problem of destroying the germ almost narrows itself down, therefore, into destroying all sputum.

This is accomplished by having the patients expectorate into paper spit-cups or napkins that can be burned, or into pocket spit-cups that can be easily disinfected, or into spittoons containing solutions like lye or carbolic acid (five per cent), which kill the germ.

Consumptives should avoid coughing or speaking into other people's faces; should have separate eating utensils which are boiled after use; should wear no beards; should bathe hands frequently, especially before eating; and should sleep in separate beds and rooms.

The bed and personal clothing and the rooms occupied by such persons should be sunned and aired as much as possible, for fresh air and sunlight will kill in a few hours the germs that live for months in damp, dark places. Because the germs live longest under such conditions, tuberculosis has also been called a house and a filth disease. Rooms of consumptives should also, when convenient, be fumigated from time to time by formaldehyde or other method.

Regarding infection through milk, it is hoped the time will soon come when all dairy herds will be free from tuberculous cattle.

The Development of the Resistance of the Body.

The elimination of the accessory or predisposing cause is accomplished by building up the bodily health.

The causes of physical weakness or retrogression were discussed in a previous paragraph and their eradication at the same time indicated.

Copies of this and other literature on prevention and cure sent gratis on application.

Other Anti-Tuberculosis Societies are given permission to republish these leaflets, on condition that credit is given to the California Association for the Study and Prevention of Tuberculosis.

In a few words, the proposition is to have all such persons breathe pure air only and constantly, every hour in the twenty-four; to eat slowly nutritious food-stuffs; and to obtain all the rest and sleep needed, with just enough bodily exercise to keep the body in good tone.

These are simple rules, but because they are in opposition to the present mode of living of many people, are extremely difficult of adoption. Teachers by word and practice in school-room can inculcate these truths with lasting effect on their pupils.

The Cure of Tuberculosis.

There is no medicinal or climatic specific or cure for tuberculosis. The basis of modern treatment, and that which is responsible for most of the healing and cures, is what is known as the hygienic-dietetic treatment. This is nothing more than the mode of life just mentioned. It can be carried out anywhere. Home climate with comforts and contentment is always superior to faraway climates with straitened circumstances and home-sickness.

Tuberculosis is healed or cured by making the blood and tissues richer and stronger. This enables them to resist and often overcome the germs and to repair the damage which has been done.

The tuberculous patient, however, needs supervision by a physician who has made a study of the disease. Complications are constantly arising and the hygienic treatment is not as simply carried out in practice as it is expressed in words. Every consumptive, therefore, should be under the care of a private or dispensary or hospital physician. If he can enter a sanatorium (place of healing) his chances of cure will be increased.

Sure cures in the way of patent medicines, and especially cough medicines containing alcohol or opiates, are dangerous. Valuable time is lost by such temporizing.

Pure air, good food, sufficient rest, a hopeful temperament and supervision by a competent physician—these are the elements that make for cure, just as they are also potent forces for prevention.

In spreading the knowledge of these truths teachers can be of inestimable service in this great struggle.

WRITTEN BY GEORGE H. KRESS.

A Few Facts About Tuberculosis [Consumption]

The Nature of the Disease.

1. Tuberculosis is a Communicable Disease.
2. Tuberculosis is a Preventable Disease.
3. Tuberculosis is a Curable Disease.

What Do the Above Three Statements

Mean?

They mean: 1. That when persons who have the disease are careless, they may infect other persons.

2. That when people take proper precautions, the disease can be prevented.

3. That when persons who have the disease, live the right kind of lives, they may be cured.

What Are the Causes of Tuberculosis?

First, a predisposing cause, that is, any mode of living which weakens the human body.

Second, an exciting cause, that is, a germ which gets into the human body, and which, in run-down persons, finds it an easy task to get a foothold and start the disease.

What is the Nature of the Germ or Exciting Cause of Tuberculosis?

The germ is a vegetable parasite, less than one five-thousandth of an inch in length. Its favorite place of growth is in the lung tissue of a person who is not in good health.

How May the Germ Be Prevented from

Acting?

Simply by destroying the sputum. The spit of a consumptive in 24 hours may contain millions of these germs. Therefore, every consumptive should spit into cuspidors containing antiseptic solutions like lye or carbolic acid (1 to 20) or into cloths, or papers or spit cups that can be burned. Never, never, never, should a consumptive talk or cough into other people's faces, nor swallow the sputum, nor spit on the floor.

*This is Educational Leaflet number 7 (Illustrated Facts) issued by the California Association for the Study and Prevention of Tuberculosis. Single copies, one cent each. Larger lots, prices on application. Office of the Association, 240 Bradbury Bldg., Los Angeles, Cal.

Copies of this and other literature on prevention and cure sent gratis on application.

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What is the Nature of the Accessory or

Predisposing Causes of Tuberculosis?

Anything that lessens the strength or resistance of the body, predisposes to tuberculosis. These causes, roughly grouped, are weakness that comes either from overwork, overcrowding, underfeeding, vicious habits or previous diseases like grippe and typhoid.

How May the Predisposing Causes be

Prevented from Acting?

By living simple lives, that is, by working and sleeping in pure air (which means well ventilated workshops and rooms), by eating nutritious foods slowly, by getting sufficient rest and sufficient exercise, by avoiding fatigue whether from unnecessary or necessary work or tasks, by refraining from vicious habits and by getting strong before going to work after an attack of some other disease like grippe.

What Are Some of the Symptoms of

Tuberculosis?

The symptoms vary. At first there may be a cough that hangs on, with irregular appetite, tendency to tire easily, a slight afternoon fever, and perhaps some loss of weight. Later the above, with night sweats, pleurisy, blood-spitting, cough with expectoration, much weakness, loss of weight and other symptoms.

How May Tuberculosis Be Cured?

By doing the same things urged in the above paragraph, namely, by following the simple life in both body and mind. If you are in poor health, tire easily, have a cough that hangs on, go to see a physician and ask his advice. In the late stages, the disease is most difficult to cure, but in the early stages the task is much easier and far less expensive.

WRITTEN BY GEORGE H. KRESS.



THE REDLANDS SETTLEMENT.



ENTRANCE TO REDLANDS SETTLEMENT.

The Story of Tuberculosis—Briefly Told in Pictures

HOW THE GERMS OF CONSUMPTION ARE CARRIED FROM THE SICK TO THE WELL



CONSUMPTIVE SPITTING ON FLOOR. FLIES FEEDING ON IT, CARRY THE GERMS OF THE DISEASE TO FOOD.



THE SPIT DRIES AND CARELESS SWEEPING, OUSTING OR DRAUGHTS CAUSE THE GERMS TO FLOAT IN THE AIR.



THE GERMS MAY ENTER THE BODIES OF CHILDREN PLAYING ON THE FLOOR, THROUGH SORES OR WOUNDS.

OTHERS MAY GET THE DISEASE BY BREATHING OR SWALLOWING THE GERMS. SPRAY GIVEN OFF IN SNEEZING OR COUGHING, CONTAINS GERMS IN A MOIST AND ACTIVE STATE.



PUTTING FOOD, MONEY, PENCILS, ETC., INTO THE MOUTH AFTER A CONSUMPTIVE HAS POISONED THEM WITH HIS SPIT.

NEW YORK STATE DEPARTMENT OF HEALTH.

CONSUMPTIONS ALLIES—AVOID THEM AND YOU ARE SAFEGUARDING AGAINST THE DISEASE



INTEMPERANCE AND OTHER EXCESSES.



THE CLOSED WINDOW.



OVERWORK.



CROWDED SLEEPING AND WORKING ROOMS.



SMOKE AND DUST.



MOUTH BREATHING OFTEN DUE TO ADENOIDS.

NEW YORK STATE DEPARTMENT OF HEALTH.

IN CASE OF CONSUMPTION, LOOK TO THESE FOR CURE



THE DOCTOR.



SUNLIGHT.



OUT-DOOR AIR.



GOOD FOOD.



REST.

NEW YORK STATE DEPARTMENT OF HEALTH.

A CAREFUL CONSUMPTIVE.—NOT DANGEROUS TO LIVE WITH.



COUGHS, SPITS AND SNEEZES INTO PAPER OR CLOTH,—



BURNS OR BOILS IT BEFORE IT DRIES,—



OR PUTS IT INTO A DISINFECTANT,—

(NEW YORK STATE DEPARTMENT OF HEALTH)



WASHES HER HANDS BEFORE AND AFTER EATING—



ALWAYS USES THE SAME DISHES AND BOILS THEM IN WATER BEFORE WASHING WITH OTHER DISHES,—



AND SLEEPS ALONE

(Form Blank.—Report of Visiting Tuberculosis Nurse.)

HELPING STATION, LOS ANGELES SOCIETY FOR THE STUDY AND PREVENTION OF TUBERCULOSIS.

Report of Visiting Nurse, Miss. ; Office 737 North Broadway; Phone A 5425.

Full name of this Patient

Mr. Miss

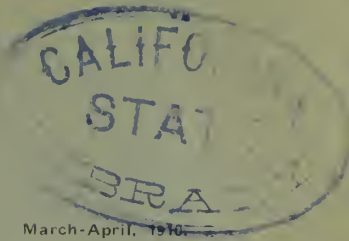
Address. To visit patient, take. car; off at. St.

For Helping Station History of this patient, see card No.

This patient referred to V. N. by.

1. Diag. tub.?	20. Disabled totally?	36. Has been given charitable aid by whom?	55. Lives in front?	77. No. of windows in room?
2. Stage? fever?	21. Disabled partially?	37. When?	56. Lives in rear?	78. Are windows opened frequently?
3. Any back in sputum?	22. Occupations formerly?	38. By Whom? Coll.?	57. Lives on what floor?	79. Are windows opened seldom?
4. Name physician?	23. Occupation, last?	39. How much?	58. No. of rooms occupied?	80. Are windows opened never?
5. Address physician?	24. Date giving up work?	40. Assoc. Char.?	59. No. in patient's family?	81. Sunlight good?
6. Age?	25. Any tuberculosis among relatives?	41. Assist. League?	60. Boys?	82. Fire escape?
7. Nativity patient?	26. Any tuberculosis among intimates?	42. Churches (name)?	61. Girls?	83. Have you (V. N.) given instructions regarding ventilation, baths, drugs?
8. Nativity parents.	27. Any tuberculosis among fellow-workers?	43. Lodges (name)?	62. Of others?	84. Have you given literature?
9. How long in U. S.?	28. Any tuberculosis in the house?	44. In surname (name)?	63. No. sleeping in patient's room?	85. Have you given sputum cup?
10. In Cal.?	29. How or from whom was disease contracted?	45. Am't? persons?	64. Location and size of patient's room?	86. Hours patient indoors?
11. In L. A.?	30. Intemperate habits?	46. Other sources (name)?	65. No. sleeping in patient's bed?	87. Hours patient outdoors?
12. Came to Cal. from what state?	31. Earns at present?	47. Patient's present residence?	66. No. sleeping in one room?	88. Nearest park?
13. Came to Cal. for health?	32. Earned previously?	48. Street and number?	67. Sanitary conditions house?	89. Previous addresses?
14. Single?	33. Financial circumstances.	49. Lived there since when?	68. Light room?	90. Change of residence contemplated?
15. Married?	34. Has been in what institutions?	50. Lives at home?	69. Medium room?	91. Landlord's name?
16. Widowed or widower?	35. When?	51. Patient boards?	70. Dark room?	92. Address?
17. Divorced or separated?		52. Patient rooms?	71. Clean room?	Remarks?
18. Think disease began when?		53. Lives in house?	72. Dirty room?	
		54. Lives in tenement?	73. Kind of wat. clos.?	
			74. Plumbing good?	
			75. Sewage good?	

Note to Visiting Nurse: The plus (+) sign may be used in answers which require yes; the zero (0) sign, in questions which require no. Keep record of subsequent visits, as visit number 1, visit number 2, etc., giving date, on back of this card. State whether patient is improved, same, or worse. Try to get pulse and temperature at each visit if patient seems very ill. Note any important items or changes in writing. Sign your name or initials to each such statement.



Volume II, No. 5 (New Series).

March-April, 1910.

The Bulletin

OF THE

California Association for the Study and Prevention of Tuberculosis

A BI-MONTHLY PUBLICATION

George H. Kress, M.D., Editor.

(Entered as second-class matter at the Postoffice at Sierra Madre, Los Angeles County, California.

The aim of this publication is to promote the study and dissemination of knowledge concerning the prevention and cure of tuberculosis, to aid in the establishment of institutions intended for those purposes, and to co-operate with such organizations as can render aid in the solution of the tuberculosis problem.

This Bulletin appears in January, March, May, July, September, and November.

This Bulletin is sent gratis to all persons who may be interested in the prevention of Tuberculosis, on application therefor.

Editorial Board consists of Dr. George H. Kress, Editor, Los Angeles; Dr. George H. Evans, San Francisco; Dr. Gayle G. Moseley, Redlands; Miss Annis Coffey, Sierra Madre, and Miss Gertrude Tucker, Sierra Madre.

Editorial contributions may be sent to the office of publication, care of Miss Gertrude Tucker, Manager, P.O. Box 141, Suffolk Ave. and Sierra Madre Place, Sierra Madre, Cal.

Notice Regarding Copy. The Secretaries of local societies are expected to send reports of the work of their organizations to the Editor, Dr. George H. Kress, 240 Bradbury Building, Los Angeles, without further notice. Officers and members of the state and local societies are urged to forward communications that seem to them to be of interest and if means allow, the same will be published.

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DIRECTORY (See next page).

Directory of Tuberculosis Associations

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* * *

Local Affiliated Associations in California (Arranged alphabetically)

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 2nd V.-Pres.... Miss Mary Page, Berkeley
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 Treasurer.....Mr. A. Gosney

Redlands Society for the Study and Prevention of Tuberculosis

President J. J. Suess Vice-Pres. Dr. Hoell Tyler Secretary. Dr. Gayle G. Mosely

Sacramento (White Cross Crusaders)

President.....Dr. W. A. Briggs
 Vice-Pres.....A. Bonnhelm
 Treasurer.....C. M. Goethe
 Secretary.....A. L. Crane
 Director.....Frank T. Dwyer
 Director.....E. Chas. Hemmings
 Director.....W. F. Geary

San Diego Society for the Study and Prevention of Tuberculosis

President.....Dr. J. A. Parks
 First Vice-Pres... Dr. F. R. Burnham
 Second Vice-Pres... Rev. W. E. Crabtree
 Secretary.....Mrs. Samuel Brust

San Francisco Association for the Study and Prevention of Tuberculosis

President.....Thos. E. Hayden
 First Vice-Pres.. Dr. Herbert C. Moffitt
 Second Vice-Pres. Mrs. Jno. F. Merrill
 Secretary.....Dr. Wm. C. Voorsanger
 Treasurer.....The Crocker Nat'l Bank
 Executive Committee—President, Secretary, Treasurer, Mrs. Jno. F. Merrill, Mrs. William H. Crocker, Dr. George H. Evans, Dr. Harry M. Sherman and Walter MacArthur.

Santa Ana Society for the Study and Prevention of Tuberculosis

President.....J. N. Anderson
 First Vice-Pres... Dr. G. H. Dobson
 Second Vice-Pres.. Dr. Willela Howe-Waffle
 Thrd Vice-Pres... Mrs. F. P. Nickey
 Secretary..... Dr. John Wehrly
 Treasurer.....D. H. Thomas

Santa Barbara Society for the Study and Prevention of Tuberculosis

President..... Secretary.....Miss Marian Watts

Sierra Madre Society for the Study and Prevention of Tuberculosis

President.....E. W. Camp
 First Vice-Pres... Dr. R. H. Mackerras
 Second Vice-Pres.. Mrs. C. H. Baker
 Secretary.....Lieut. C. B. Street
 Treasurer.....George Humphries

CLOSE OF THE FISCAL YEAR.

This issue of the BULLETIN contains the minutes of the newly elected officers and the reports for the fiscal year just closed.

Affiliated societies are requested to send in the subscriptions of their members for the BULLETIN. The subscription price of the BULLETIN has been changed to ten cents per annum, which hardly pays the expense of mailing, etc. It is hoped in this way to reach a larger circle of readers than ever.

Suggestions for the year's work will be gladly welcomed.

The president for the coming year is Dr. Gayle Moseley of Redlands, who has been at the head of the Redlands Settlement for Indigent Consumptives, the pioneer effort in anti-tuberculosis work in the State of California.

Under his administration we hope for a most prosperous year.

1910 ANNUAL MEETING OF THE CALIFORNIA ASSOCIATION FOR THE STUDY AND PREVENTION OF TUBERCULOSIS.

As per the notices sent out to the members and to the affiliated societies by order of the president of the State Association, the Annual Meeting was held in the Art Room of Blanchard Hall, opposite the Los Angeles City Hall, on Friday night, April 29th, at 8:15 p.m.

The meeting was called to order by Dr. Fitch C. E. Martison of Pasadena, the president.

The minutes of the last annual meeting and of subsequent meetings of the Executive Committee were read and approved. The secretary then read his report which is appended to these minutes as Exhibit A.

The recommendation of the secretary to amend the By-Laws by making the annual dues of members of local affiliated societies ten cents instead of twenty-five cents, on motion of Dr. Moseley of Redlands was carried.

On motion a Nominating Committee of three was appointed to bring in names of officers for the succeeding year. The chairman appointed Drs. Burke of Redlands, Dr. Dryer of Santa Ana and Dr. Kress of Los Angeles.

On motion, at the request of the secretary it was voted to appoint an auditing committee to audit the books of the secretary. The chairman appointed Dr. F. M. Pottenger of Monrovia and Dr. Gayle Moseley of Redlands for this work.

The Nominating Committee then brought in the following report:

DIRECTORS:

Dr. Gayle Moseley, Redlands,

President.

Mr. Kenneth Millican, Oakland,

First Vice-President.

Dr. John Dryer, Santa Ana,

Second Vice-President.

Dr. George H. Kress, Los Angeles,

Secretary.

Mr. C. H. Toll, Los Angeles,

Treasurer.

Dr. Norman Bridge, Pasadena.

Dr. C. C. Browning, Monrovia.

Mr. C. B. Boothe, South Pasadena.

Dr. L. M. Powers, Los Angeles.

Dr. George L. Cole, Los Angeles.

Dr. W. Jarvis Barlow, Los Angeles.

Dr. W. Le Moyne Wills, South Pasadena.

Dr. F. M. Pottenger, Monrovia.

Dr. George H. Evans, San Francisco.

Dr. N. K. Foster, Oakland.

Dr. Martin Regensburger, San Francisco.

Dr. G. Rinehardt, Berkeley.

Dr. Edward von Adelung, Oakland.

Dr. F. W. Steddom, Los Angeles.

Dr. Wm. C. Voorsanger, San Francisco.

Dr. Harry Sherman, San Francisco.

Mr. Walter McArthur, San Francisco.

Mrs. John Merrill, San Francisco.

Dr. F. L. Rogers, Long Beach.

Dr. R. H. Mackerras, Sierra Madre.

Dr. Henry Stehman, Pasadena.

Dr. Fitch C. E. Mattison, Pasadena
 Dr. Titian Coffey, Los Angeles
 Dr. Stanley P. Black, Pasadena
 Dr. E. A. Osborne, Santa Clara
 Dr. Rexwald Brown, Santa Barbara
 Dr. W. A. Briggs, Sacramento
 Dr. Wm. F. Snow, Sacramento
 Mrs. Nina Brust, San Diego
 Dr. John C. King, Banning
 Dr. W. W. Roblee, Riverside
 Dr. R. S. Gibbs, San Bernardino
 Dr. W. P. Burke, Redlands
 Dr. John Wehrle, Santa Ana
 Dr. George Tucker, Riverside

On motion the secretary was ordered to cast the ballot for the above nominees, and the president then declared them elected.

The retiring chairman, Dr. Fitch C. E. Mattison, then called the president-elect, Dr. Gayle Mosley, to the chair. Dr. Mosley spoke at some length upon the work which the Society ought to aim to do during the coming year. He then announced the names of the chairmen of the Standing Committees as follows:

1. Finance Committee. Dr. W. P. Burke, Redlands.
2. Membership Committee. Dr. John Dryer, Santa Ana.
3. Press and Publicity Committee. Dr. F. M. Pottenger, Monrovia.
4. Legislative and Law Enforcement Committee. Dr. Fitch C. E. Mattison, Pasadena.
5. Literature and Publication Committee. Dr. George H. Kress, Los Angeles.
6. Hospital and Dispensary Committee. Dr. W. Jarvis Barlow, Los Angeles.
7. Consulting Medical Committee. Dr. C. C. Browning, Monrovia.
8. Lectures and Public Meetings Committee. Dr. W. Le Moyne Webb, South Pasadena.

The president-elect stated that he would ask these gentlemen to select the remaining members of their own com-

mittees, each committee to consist of five members from the Board of Directors) in order that the work of such committees might be most harmoniously expedited, and the secretary was instructed to send out a notice to that effect.

The matter of prospective anti-tuberculous legislation to come before the next session of the Legislature then came up for discussion. It was felt that whatever steps were taken, an effort should be made to see the prospective state legislators and senators before they were nominated, and at any rate before they went to Sacramento.

The matter of a State Sanatorium was then taken up. Drs. Kress, Mattison, Mosley and Pottenger participated in the discussion, the consensus of opinion being that at this time it was probably not best to ask for a State Sanatorium for incipient cases, as such an institution would probably cost \$150,000 to build and there would be little assurance that it would be conducted along the lines most conducive to the interests of the Anti-Tuberculosis Welfare in California.

It was felt that a much wiser plan would be to secure an appropriation from the State Legislature whereby the State could see to properly conducted sanatoria such as the Redlands Settlement, the Barlow Sanatorium at Los Angeles and the White Crocoders of Sacramento, \$1000 per week for each incipient case as time properly presented, the said appropriation to cover the necessary expenses of board and treatment. It was felt that only such persons who had been residents of California for at least one to two years and who were incipient cases should be eligible to such institutions, it being agreed that far advanced cases should be cared for by the County Hospitals. On motion this matter was referred to the Legislative Committee for further report and action.

On motion it was voted to ask the Legislative Committee to bring in a report asking the next State Legislature to appropriate at least \$15,000 to be at the disposal of the State Board of Health to carry on an educational campaign and public health work throughout California.

On motion the California State Association for the Study and Prevention of Tuberculosis went on record in favor of the Owens Bill now before the United States Senate and the secretary was instructed to write to the California Senators and Congressmen informing them of its decision.

A discussion of *County Hospital Methods in the treatment of Tuberculosis* then came up and on motion by Dr. Pottenger a committee of five was appointed from this Association to confer with a committee of three from the Los Angeles Society for the Study and Prevention of Tuberculosis to visit the L. A. County Hospital and to see whether we can be of any service in the care of the advanced cases in that institution. The chairman appointed for this service Drs. Pottenger, Mattison, Kress, Dryer and Moseley.

There being no further business, after discussion of miscellaneous topics, a motion to adjourn was made and carried.

GEORGE H. KRESS,
Secretary.

FITCH C. E. MATTISON, M.D.

Retiring President.

GAYLE MOSELEY, M.D.

President-Elect.

**ANNUAL REPORT OF THE SECRETARY FOR THE FISCAL YEAR,
APRIL, 1909-APRIL, 1910.**

Mr. President and Members:

The report herewith presented covers the fiscal year April 22, 1909, to April 29, 1910, inclusive.

The total net income of the California Association for the Study and Preven-

tion of Tuberculosis during this period was \$1422.30.

Of this amount, \$607.50 was received from the sale of the Los Angeles stamp and \$312.50 from the sale of stamps by other affiliated societies, leaving \$502.24 from other sources.

The total expenditures of the State Association were \$886.14, the great bulk of which went to pay printers and postage bills.

Detailed statements of income and expenses are attached to this report as Exhibit A and B respectively. The receipt index check books and vouchers are also at the disposal of the Association.

Inasmuch as the Christmas Stamp campaign in Los Angeles was managed by the secretary of the State Association the expenses of that campaign, for making designs and cuts of the different stamps, and printing stamps, educational literature, posters, postage, etc., amounting to a total of \$1297.47, were paid out through the State Association books in order to keep the said expenses as a matter of permanent record. That amount of money was deposited to the credit of the State Association by the Los Angeles Christmas Stamp Committee, so that for practical purposes the said Los Angeles Christmas Stamp account was closed.

The balance on hand at the time this report is made is \$536.16, of which amount \$141.75 is United States postage, taken by the State Association as part of its \$607.50 derived from the sale of the Christmas Stamps in Los Angeles.

The experience of the last year has shown that the State Association cannot rely on any considerable income from the local societies. They certainly will not give 25 cents of their one dollar membership dues to the State Association. The work of raising money for local needs is so great that they all feel that the local money should be spent for local needs.

The secretary has not been able to decide whether they would even give 10 cents a year per member. The plan is, however, well worth trying and we make the recommendation that Article I, Section 2, be amended by reducing the assessment of members of affiliated societies from 25 to 10 cents.

No considerable income being possible then from the affiliated societies, there is left then only the Christmas Stamp as a means of possible income.

We believe that next year, by getting an early start it should be possible to raise treble or quadruple as much as was raised last Christmas.

These *Christmas Stamp campaigns* are not only valuable because of the money derived therefrom, but because they center public attention upon the anti tuberculosis campaign and are a most valuable method of educating our people. A report of the Los Angeles Christmas Stamp Committee is appended as being of interest in this connection.

From the foregoing, it is seen that if our State Association is to continue its existence, the Christmas Stamp is almost an absolute necessity.

I. Regarding the Distribution of Literature.

A. BULLETIN. The bi-monthly BULLETIN has appeared every two months and thousands of copies have been distributed to members of affiliated societies and to other interested persons.

B. EDUCATIONAL LEAFLETS. A full set of educational leaflets—eight in all—have been printed and about 50,000 copies have been distributed through the affiliated societies.

C. NEWSPAPER NOTICES. Every two weeks we have sent to every newspaper in California a press bulletin, supplied to us by the National Association for the Study and Prevention of Tuberculosis. In this way thousands and thousands of persons have received additional literature and education con-

cerning the causes, prevention and cure of tuberculosis.

II. Concerning Lectures.

A large number of lectures have been given.

On April 24, 1910. Tuberculosis Sunday was observed by many churches. Literature was sent broadcast to the ministers of our state.

III. Legislation.

This fall a new Legislature should meet. The Association should decide early what it wants, and by co-operation with other public health associations, impress on our legislature the needs of our state concerning this important public health problem.

IV. Organization.

The state is better organized than ever before, there being a total of 10 active societies, all but two of these being the direct progeny of this Association and the other two probably having received some of their indirect inspiration therefrom. During the last year in our sister territories of Arizona and New Mexico, sister organizations modeled after our own came into existence, doing good work, so far as we know.

The task of the coming year is to still further extend this organization, and movements are already under way at Riverside and San Bernardino.

Respectfully submitted,

GEORGE H. KRESS,
Secretary.

REPORT OF THE LOS ANGELES CHRISTMAS STAMP COMMITTEE.

March 15, 1910.

To the Executive Committees of the California and Los Angeles Societies for the Study and Prevention of Tuberculosis:

The report of the Los Angeles Christmas Stamp Committee is herewith presented, with the twenty receipt books in which the income was tabu-

lated. All expenses in connection with the sale of the Christmas Stamps were paid out by voucher check through the regular books of the State Tuberculosis Association in order to have such expenses a matter of permanent record.

I. Total Gross Income from sale of Los Angeles Stamps	\$2512.47
II. Total Expenses of Educational Campaign and Sale of Stamps in Los Angeles	1297.47
III. Total Net Income from Sale of Los Angeles Stamps	\$1215.00

One-half of the net proceeds, viz: \$607.50, as per resolution and action of the Los Angeles Executive Committee prior to the sale, goes to the Los Angeles Society, the other one-half to the State Association.

Of the above amount \$141.75 is in U. S. stamps, which can either be sold at a discount or used next Christmas during the stamp campaign of 1911.

Note—These stamps were taken by State Association at their par value.

In addition to the above the Los Angeles Society received about \$100 in cash subscriptions as a result of the campaign.

The Los Angeles Society also received a Visiting Nurse at \$900 a year (equivalent to the interest on an endowment of \$18,000) as a result of this campaign. As the nurse will virtually become a permanency, it means much for the Society. I feel certain I would not have been able to obtain this nurse from the City Council had it not been for the aggressive educational campaign connected with the sale of the stamps, by means of which a public sentiment had been created that forbade a veto of our petition by the Council.

The California Association also received about \$312.56 from outside Societies, from the sale of their special stamps.

The net amount turned over to the Los Angeles Society was one-half of the net proceeds of the stamps sold in Los Angeles, viz: \$607.50.

To this must be added income from regular and miscellaneous subscriptions; also income received from annual membership; which will make up the total income for 1910.

The Los Angeles Society is now in a position to do better work than ever before. It has a visiting city nurse, Miss. A. B. Foster, who keeps in close touch with the different societies like the Associated Charities, the Assistance League, the Mothers' Congress, the County Charity Officers, the County Hospital, the city physicians of the poor, and others who have to do with work among the tuberculous poor. In addition, Miss Gertrude Tucker, the clinic nurse, takes charge of the clinics and the distribution of medicine by the physicians.

Five physicians (in the order of seniority of service) Drs. George H. Kress, David D. Thornton, E. Huggins, C. C. Warden and Elmer Pascoe, hold clinics in the Graves Dispensary Building of the State University Medical Department at 737 North Broadway, on Mondays, Tuesdays, Wednesdays, Thursdays and Fridays of each week.

This coming year should, therefore, be one of steady forward movement in the work.

Regarding the Christmas Stamps for next fall, we believe that with the experience which was gained in this last campaign and with a public thoroughly enlightened on the subject, it should be possible, by beginning early in November with a broad and aggressive campaign, to net between one and two thousand dollars for the Society.

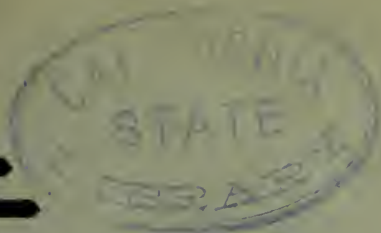
Respectfully submitted,

LOS ANGELES CHRISTMAS STAMP COMMITTEE.

**ALAMEDA COUNTY SOCIETY
ELECTS OFFICERS.**

At the first annual meeting of Alameda County Society for the Study and Prevention of Tuberculosis, March 25, Kenneth A. Millican was re-elected president; Dr. Edward von Adelung, Oakland, first vice-president; Dr. Charles A. Dukes, Oakland, a member of the Executive Committee, and Drs. Nelson H. Chamberlain, Oakland; Edward N. Ewer, Oakland; Alexander S. Kelly, Oakland; Florence M. Sylvester, Oakland; F. M. Simpson, and Samuel J.

Wells, Pleasanton, members of the board of directors; Dr. Ergo J. Majors, Oakland, chairman of the Hospital Committee; Dr. A. A. Alexander, Oakland, chairman of Committee on Public Education and Hygiene; Dr. Florence M. Sylvester, Oakland, chairman of the Open Air School Committee; Dr. Walter S. Rutherford, Oakland, chairman of the Membership Committee; Dr. Edward N. Ewer, Oakland, chairman of Public Service Committee, and Dr. Edward von Adelung, Oakland, chairman of Clinic Committee.



Volume II, No. 6 (New Series).

May-June, 1910.

The Bulletin

OF THE

California Association for the Study and Prevention of Tuberculosis

A BI-MONTHLY PUBLICATION

George H. Kress, M.D., Editor.

(Entered as second-class matter at the Postoffice at Sierra Madre, Los Angeles County, California.)

The aim of this publication is to promote the study and dissemination of knowledge concerning the prevention and cure of tuberculosis, to aid in the establishment of institutions intended for those purposes, and to co-operate with such organizations as can render aid in the solution of the tuberculosis problem.

This Bulletin appears in January, March, May, July, September, and November.

This Bulletin is sent gratis to all persons who may be interested in the prevention of Tuberculosis, on application therefor; the aim of the publication being to spread knowledge concerning the prevention of tuberculosis, to the end that this disease may be prevented from causing loss of health or death to citizens of California.

Editorial Board consists of Dr. George H. Kress, Editor, Los Angeles; Dr. George H. Evans, San Francisco; Dr. Gayle G. Moseley, Redlands; Miss Annis Coffey, Sierra Madre, and Miss Gertrude Tucker, Sierra Madre.

Editorial contributions may be sent to the office of publication, care of Miss Gertrude Tucker, Manager, P.O. Box 141, Suffolk Ave. and Sierra Madre Place, Sierra Madre, Cal.

Notice Regarding Copy.—The Secretaries of local societies are expected to send reports of the work of their organizations to the Editor, Dr. George H. Kress, 240 Bradbury Building, Los Angeles, without further notice. Officers and members of the state and local societies are urged to forward communications that seem to them to be of interest and if means allow, the same will be published.

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DIRECTORY (See next page).

Directory of Tuberculosis Associations

International Tuberculosis Association

President.....Dr. Lawrence F. Flick, Philadelphia, Pa., U.S.A
 First Vice-President.....Dr. Robert Koch, Berlin, Germany
 Second Vice-President.....Dr. L. Landouzy, Paris, France
 Third Vice-President.....Dr. Theodore Williams, London, England
 Secretary-General.....Dr. G. Fannwitz, Berlin, Germany.

National (U. S. A.) Association for the Study and Prevention of Tuberculosis

President.....	Dr. Edward G. Janeway	Vice-President. Dr. Henry Sewall
Hon. Vice-Pres.	Hon. Theodore Roosevelt	Treasurer.....
Hon. Vice-Pres.	Dr. Wm. Osier	Gen. George M. Sternberg
Vice-President..	Edward T. Devine	Secretary.....
		Dr. Henry Barton Jacobs
		Exec. Sec'ty... Dr. Livingston Farrand
		105 E. 22nd St., N. Y.

* * *

California Association for the Study and Prevention of Tuberculosis

President.....	Dr. Gayle Moseley	Treasurer.....	Mr. Charles H. Toll
	Redlands, Cal.		Los Angeles
First Vice-Pres..	Kenneth A. Millikan	Secretary and Editor	
	Oakland, Cal.	of the Bulletin....	Dr. George H. Kress
Second Vice-Pres.	Dr. John Dryer		240 Bradbury Bldg., Los Angeles
	Santa Ana, Cal.		

* * *

Local Affiliated Associations in California (Arranged alphabetically)

Alameda County Society for the Study and Prevention of Tuberculosis

President.....	Kenneth A. Millikan	Secretary.....	Miss Annie F. Brown
1st V.-Pres....	Dr. Edward Von Adelung		320 First Nat. Bank Bldg., Oakland.

Long Beach Society for the Study and Prevention of Tuberculosis

President.....	Mrs. W. H. Newman	Secretary.....	Prof. M. A. Huff
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Los Angeles Society for the Study and Prevention of Tuberculosis

President.....	Dr. Norman Bridge	Secretary.....	Dr. Donald J. Frick
First Vice-Pres..	Edwin T. Earl		Wright Callender Bldg.
Second Vice-Pres.	A. L. Stetson	Treasurer.....	R. W. Kenny

Monrovia (Visiting Nurses' Association)

President.....	Mrs. John H. Bartel	Secretary.....	Mrs. W. Judson Smith
Vice-President.	Mrs. M. L. Butts	Treasurer.....	Mrs. J. J. Renaker
Vice-President.	Mrs. Hardy Harris		

Pasadena Society for the Study and Prevention of Tuberculosis

President.....	Dr. Henry Sherry	Third Vice-Pres....	Mr. C. B. Scoville
First Vice-Pres..	Dr. Chas. Lee King	Secretary.....	Dr. E. H. McMillan
Second Vice-Pres.	Mrs. Fordyce Grinnell		Chamber of Commerce Bldg.

Redlands Society for the Study and Prevention of Tuberculosis

President.	J. J. Suess	Vice-Pres.	Dr. Hoeli Tyler	Secretary.	Dr. Gayle G. Mosely
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Sacramento (White Cross Crusaders)

President.....	Dr. W. A. Briggs	Director.....	Frank T. Dwyer
Vice-Pres.....	A. Bonnhelm	Director.....	E. Chas. Hemmings
Treasurer.....	C. M. Goethe	Director.....	W. F. Geary
Secretary.....	A. L. Crane		

San Diego Society for the Study and Prevention of Tuberculosis

President.....	Dr. J. A. Parks	Secretary.....	Mrs. Samuel Brust
First Vice-Pres..	Dr. F. R. Burnham		1669 First Street.

San Francisco Association for the Study and Prevention of Tuberculosis

President.....	Thos. E. Hayden	Executive Committee—President, Secretary, Treasurer, Mrs. Jno. F. Merrill,
First Vice-Pres..	Dr. Herbert C. Moffitt	Mrs. William H. Crocker, Dr. George
Second Vice-Pres.	Mrs. Jno. F. Merrill	H. Evans, Dr. Harry M. Sherman and
Secretary.....	Dr. Wm. C. Voorsanger	Walter MacArthur.
	1547 Jackson Street.	

Santa Ana Society for the Study and Prevention of Tuberculosis

President.....	J. N. Anderson	Third Vice-Pres....	Mrs. F. P. Nickey
First Vice-Pres..	Dr. G. H. Dobson	Secretary.....	Dr. John Wehrly
Second Vice-Pres.	Dr. Willela Howe-Waffle		Hervey Block.

Santa Barbara Society for the Study and Prevention of Tuberculosis

President.....		Secretary.....	Miss Marian Watts
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Sierra Madre Society for the Study and Prevention of Tuberculosis

President.....	E. W. Camp	Secretary.....	Dr. R. H. Mackerras
Vice-Pres.....	Mrs. C. H. Baker	Treasurer.....	George Humphries

LOS ANGELES COUNTY HOSPITAL.

First, as regards the erection of new buildings, we believe that all of the brick buildings which have been erected in recent years have basements, and nearly all of which are now occupied by patients, would be better if the basements had higher ceilings; and further, that in these *basement wards* or basement rooms especially an attempt should be made to have all of the windows flush with the ceiling, or, if that is not desirable, then to place over each window a transom that would be flush with the ceiling. This would go far toward providing better ventilation than can now be had in these basement wards.

As regards the *wards on the second and third floors*, we believe that in a general way the money that is spent in the present additional extra height, which gives little or no extra ventilation, could be more wisely expended in the equipment of the building, or in making the basements more sanitary from the light and ventilation standpoints. The four or six-foot air well above the tops of the windows of the upstairs wards really adds nothing to the efficiency of the ventilation, but simply represents an expenditure of money for material which in three-story buildings would be sufficient to almost pay for an additional story or ward. In these upstairs wards—as in the basement wards—we believe that windows flush with the ceilings or that transoms above such windows which would be made almost flush with the ceilings would add greatly to the purity of the air in these wards.

We would also suggest that in the erection of any new buildings, particularly if such buildings are to be to the rear of the present buildings, as is the present tuberculosis pavilion, that they be arranged with flat roofs which can be used for *roof gardens*. The new

tuberculosis pavilion, for instance, would have a greater efficiency if this had been done, and at no material extra cost.

The *new tuberculosis building* is certainly a vast improvement on the old building which was used for these patients, but if this building is to really be of value during the coming summer it will be necessary to *screen* in the outside porches, preferably with copper wire screening, as that would be more economical in the long run. Unless this is done, the flies will be so bad that it will be impossible for the patients to live the out-of-door life and to sleep on these verandas.

There is an urgent need also for reclining chairs, preferably of a wicker style such as those which are used by the Barlow Sanitarium and which can be had for about \$10.00 each. These far advanced tuberculosis patients at the County Hospital should be in bed or in *reclining chairs* most of the time, and to attempt treatment of such patients when they are up and about is to go against all that we have learned in the care of this disease. At the present time there is not a single such chair for the more than one hundred patients.

The *roads* by the brickyards, adjacent to the tuberculosis building, from which perfect fogs of dust are constantly raised, should be oiled, likewise any roads to be made in the rear of the buildings. An effort should also be made to have the manufacturing interests round about to abate the *noise nuisances*; steam should be blown off in underground pits and whistles should not be blown at unearthly hours of the morning or night.

Going back to the matter of flies, the *manure pits* in connection with the stables should be provided with covered tops. To have an open manure pit close to a hospital, which handles infectious

diseases, simply means a vast breeding place for flies that can carry infection to other patients and to other portions of the city, and is so flagrant a violation of sanitary principles that it should not be tolerated for a moment.

We are glad to note that the Supervisors are making an attempt to *park the grounds in the rear of the place* and we commend this effort most cordially. We hope the Park Department of our city will give the necessary trees and shrubbery and that the proper walks will be laid out by the chain gang and changes made, and also a sufficient number of sanitary drinking fountains supplied. This matter is important to the well-being of the tuberculous patients especially and should be pushed vigorously.

In this connection, the suggestion has been made that a *day tuberculosis camp* might be established in this park to the rear of the tuberculosis building. If this park were laid out and put in lawn and shrubbery it would soon be very beautiful. There are now a sufficient number of shade trees and with the six tent houses formerly used, there would be adequate facilities for rest and comfort of the ambulant patients. Milk or a light lunch could be given the patients by the county or by the Tuberculosis Society, and the patients could be under the supervision of the city and Tuberculosis Society nurses if no others could be spared. Why not give these unfortunate consumptives a chance for recovery when they can still help themselves, instead of waiting until they are all in and recovery is out of the question?

Excerpt from report of a special committee consisting of Dr. George H. Kress and Dr. O. O. Witherbee to the Board of Councilors of the Los Angeles County Medical Association, and by that board endorsed and ordered sent to the Board of Supervisors of Los Angeles County.

MILLIONS SPENT ON FRAUDS.

Fake Consumption Cures Cheat Public Out of \$15,000,000.

Over \$15,000,000 annually is poured into the coffers of those who exploit and advertise fake consumption cures, according to a statement issued today by the National Association for the Study and Prevention of Tuberculosis; and for this vast sum the victims receive nothing in return, but are often permanently injured and in the majority of cases cheated out of the chance for a real cure. Worse still, most of this money is paid by those who can least afford it.

The National Association has investigated several hundred so-called "cures" and "treatments" for tuberculosis now being advertised throughout the country, and finds that more than \$3,000,000 a year is being spent in soliciting the patronage of the public. On examination, it has been found that the great majority of these "cures" contain harmful and habit-forming drugs, such as morphine, opium and chloroform. None of them will cure consumption. The only cure for this disease that has ever been discovered is the combination of fresh air, rest and wholesome food. All of the "cures" that attempt to destroy the tubercle bacillus without these or to stop the progress of the disease in some mysterious way are branded as frauds, and impositions.

Three classes of "cures" are distinguished by the National Association. In the first class are included devices and drugs which can be bought for any sum ranging from ten cents to five dollars at a drug store. The United States Department of Agriculture has just issued a bulletin in which some of the most used of these drugs and remedies are analyzed and condemned. The second class of "cures" includes the "institutes," "professors" or companies of "doctors," who for a

consideration guarantee to cure consumption by some secret method of which they are the sole proprietors. There are nearly one hundred and fifty of these institute frauds in the United States, cheating the people out of millions of dollars annually.

In the third class of "cures" are placed a number of home-made remedies, which either through ignorance or superstition have been advanced as treatments for tuberculosis. Some of these are, onions, lemons, rattlesnake poison, coal dust, lime dust, pigs' blood, dog oil, milk "strippings," and even alcohol. These will not cure consumption, declares the National Association. No drug, gas or other material has yet been discovered, which, when eaten, inhaled or injected into the body, will kill the germs of tuberculosis. Fresh air, which contains more oxygen than any substance known, will destroy the germs of tuberculosis, if it is breathed continuously for a long enough period, and if rest and wholesome food are employed at the same time to build up the body.

MILLIONS EDUCATED ON CONSUMPTION.

One-eighth of Churchgoers Heard Health Gospel on Tuberculosis Sunday.

Over 3,000,000 churchgoers, nearly 40,000 sermons and preachers, and more than 1,250,000 pieces of literature, are some of the totals given in a preliminary report issued today by the National Association for the Study and Prevention of Tuberculosis, of the results of the first National Tuberculosis Sunday ever held, on April 24th.

The report states that fully one-eighth of the 33,000,000 listed communicants of the churches of the United States heard the gospel of health on Tuberculosis Sunday, and that the number of people who were reached by notices and sermons printed in the

newspapers will aggregate 25,000,000. Hardly a paper in the country failed to announce the occasion.

From clipping returns received at the National Association's headquarters, it is estimated that fully 20,000 newspapers, magazines, religious and technical journals gave publicity to this national event. For this assistance on the part of the press, the National Association desires to express its thanks.

Although the movement for Tuberculosis Sunday was handicapped by a lack of time and funds, the National Association feels that the campaign has been worth while. Many foreign countries observed the day also. Plans are now under way for a wider observance of the day in 1911. The active co-operation of every religious denomination, besides that of the governors, mayors and public officials, as well as that of other agencies will be sought.

The promoters of this movement announce that they do not wish to interfere with the church calendar of any denomination. It is not planned to have a special Tuberculosis Sunday as a regular church day. The plan is to have the subject of health, and particularly tuberculosis, brought up in the churches for any service or part of a service and as nearly simultaneously in all parts of the country as possible.

FLY TIME.

The American Civic Association of Washington, D. C., has issued a leaflet for free distribution, warning people against the housefly, and giving directions for its destruction. Some of the information contained in the leaflet is as follows:

The common housefly is coming to be known as the "typhoid fly," and when the term becomes universal greater care will be exercised in protecting the house from his presence.

Flies kill a greater number of human beings than all the beasts of prey, with

all of the poisonous serpents added. They spread disease which slays thousands, while big, powerful beasts kill single victims.

They can discern an odor of filth for miles.

As much as they like filth odors they dislike other odors. A pleasant swelling substance—the fragrance of flowers, geraniums, mignonette, lavender or any perfumery—will drive them away.

The fly lays her eggs in the manure pile or other objectionable filth. All the germs—all the imaginable, abominable microbes—fasten themselves on the spongy feet of the fly. He brings them into the house and wipes them off his feet. The fly you see walking over the food you are about to eat is covered with filth and germs. If there is any dirt in your house or about your premises, or those of your neighbors, he has just come from it. It is his home. Watch him as he stands on the lump of sugar industriously wiping his feet. He is wiping off the disease germs; rubbing them on the sugar that you are going to eat, leaving the poison for you to swallow.

He wipes his feet on the food that you eat, on the faces and lips of your sleeping children. This does more to spread typhoid fever and cholera infantum and other intestinal diseases than any other cause.

There is special danger when flies drop into such fluid as milk.

Remember that wherever absolute cleanliness prevails there will be no flies.

Look after the garbage cans. See that they are cleaned, sprinkled with lime or kerosene oil, and closely covered.

TO KILL FLIES.

A cheap and perfectly reliable fly poison, one which is not dangerous to human life, is bichromate of potash in solution. Dissolve one dram, which can be bought at any drug store, in two ounces of water, and add a little sugar.

Put some of this solution in shallow dishes, and distribute them about the house.

Among the things used in killing flies the latest, cheapest and best is a solution of formalin or formaldehyde in water. A spoonful of this liquid put into a quarter of a pint of water and exposed in the room will be enough to kill all the flies.

To quickly clear the room where there are many flies, burn pyrethrum powder in the room. This stupefies the flies, when they may be swept up and burned.

BE CAREFUL ABOUT MILK.

The time is approaching when special care must be taken of milk in the home. Milk is a medium in which all varieties of micro-organisms will multiply rapidly if the conditions are favorable. This multiplication of germ life occurs with great rapidity when the milk is kept at a temperature above 70 degrees F. At higher temperatures the multiplication occurs with still greater rapidity. A few disease germs present in the milk delivered in the morning will increase so rapidly at a temperature above 70 degrees that the milk, after standing twelve or sixteen hours, will contain enough of them to transmit disease to any susceptible individual.

It is therefore evident that the milk in the home should be protected against infection with micro-organisms of all kinds, and that it should be kept at a temperature which will retard multiplication of bacteria which may be present in the milk before delivery.

Arrangements should be made for the proper keeping of the milk after delivery. It should be protected from the rays of the sun and from flies. A convenient way of receiving milk is to place a special box or can in a protected place and leave instructions for the milk man to place the bottles therein and replace the cover. In very hot

weather and in families where the milk is to be used for baby feeding, it might be well to place a piece of ice in this box late at night. Where no steps are taken to refrigerate the milk in this way, it should be taken into the house as early as possible and placed in the ice box.

At meal time, or when feeding the baby, the required amount of milk should be taken from the original bottle. It is not advisable to take a bottle of milk from the refrigerator and place it on the table. This exposes the milk to flies and dust and leads to its warming and to the rapid multiplication of the micro-organisms therein contained. It is much better to pour the required amount in a pitcher and leave the original bottle, with cap replaced, in the refrigerator. A convenient way of closing the mouth of the bottle in the ice box is to invert a small drinking glass over the neck of the bottle.

Bottles should be cleaned before returning to the milk dealer. They should first be rinsed with cold water, then scrubbed with warm water and soap and finally rinsed with hot water. Unwashed bottles oftentimes become very foul before they can be returned to the milk depot and properly washed. No family should return unwashed bottles to the milk man during the summer.—*Bulletin Chicago Department*

DO YOU KNOW HOW TO DUST?

If you do, you won't use a feather duster.

The feather duster is doomed. The recruits in the warfare against consumption have taken up arms against it, and, like the old oaken bucket so dear to our childhood, it is to be known to the next generation only in song and story.

A feather duster does not remove the dust from the room, but only brushes it into the air so that you breathe it in; or it settles down and

then you have to do the work over again.

Use soft, dry cloths to dust with, and shake them frequently out of the window; or use slightly moistened cloths and rinse them out in water when you have finished. In this way you get the dust out of the room.

When you sweep a room raise as little dust as possible, because dust, when breathed, irritates the nose and throat, and may set up catarrh. Some of the dust breathed in dusty air reaches the lungs, making parts of them black and hard and useless.

If dust in the air you breathe contains the germs of consumption—tubercle bacilli—which have come from consumptives spitting on the floors, you run the risk of getting consumption yourself. If consumptives use proper spit cups, and are careful in coughing or sneezing to hold a handkerchief or the hand over the nose and mouth so as not to scatter spittle about in the air, the risk of getting the disease by living in the same rooms is mostly removed.

Buy a vacuum cleaner if you can possibly afford one.

If you can not, sprinkle moist sawdust on bare floors to prevent making a great dust in sweeping them. When the room is carpeted, moisten a newspaper, tear into scraps, and scatter these upon the carpet where you begin sweeping. As you sweep, brush the papers along by the broom, and they will catch most of the dust and hold it fast, just as the sawdust does on bare floors. Do not have either the paper or the sawdust dripping wet; only moist.—*Fresh Air Magazine*.

Underfeeding is bad; overfeeding is worse.

Open windows close the door to consumption.

Good health is the best form of life insurance.

THE STORY OF TUBERCULOSIS—BRIEFLY TOLD IN PICTURES.

HOW THE GERMS OF CONSUMPTION ARE CARRIED FROM THE SICK TO THE WELL



CONSUMPTIVE SPITTING ON FLOOR. FLIES FEEDING ON IT, CARRY THE GERMS OF THE DISEASE TO FOOD.

THE SPIT DRIES AND CARELESS SWEEPING, DUSTING OR DRAUGHTS CAUSE THE GERMS TO FLOAT IN THE AIR.

THE GERMS MAY ENTER THE NOSES OF CHILDREN PLAYING ON THE FLOOR, THROUGH SOLE'S OF SHOES.

OTHERS MAY GET THE DISEASE BY BREATHING OR SHALLOWING THE GERMS. SPRAY GIVEN OFF IN SNEEZING OR COUGHING, CONTAINS GERMS IN A MOIST AND ACTIVE STATE.

PUTTING FOOD, MONEY, PENCILS ETC., INTO THE MOUTH AFTER A CONSUMPTIVE HAS POISONED THEM WITH HIS SPIT.

NEW YORK STATE DEPARTMENT OF HEALTH.

CONSUMPTIONS ALLIES—AVOID THEM AND YOU ARE SAFEGUARDING AGAINST THE DISEASE



INTEMPERANCE AND OTHER EXCESSES.

THE CLOSED WINDOW.

OVERWORK.

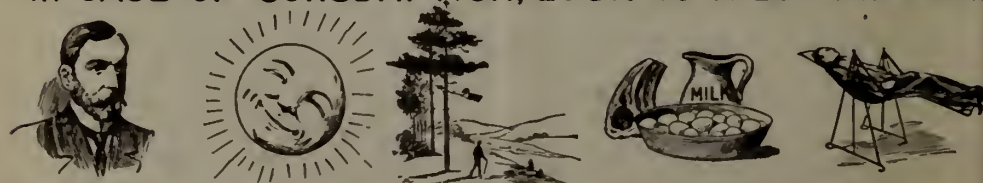
CROWDED SLEEPING LAYERS AND WORKING ROOMS.

SMOKE AND DUST.

MOUTH BREATHING OFTEN DUE TO ADENOID.

NEW YORK STATE DEPARTMENT OF HEALTH.

IN CASE OF CONSUMPTION, LOOK TO THESE FOR CURE



THE DOCTOR.

SUNLIGHT.

OUT-DOOR AIR.

GOOD FOOD.

REST.

NEW YORK STATE DEPARTMENT OF HEALTH.

A CAREFUL CONSUMPTIVE.—NOT DANGEROUS TO LIVE WITH.



COUGHS, SPITS AND SNEEZES INTO PAPER OR CLOTH,—

BURNS OR BOILS IT BEFORE IT DRIES,—

OR PUTS IT INTO A DISINFECTANT,—

WASHES HER HANDS BEFORE AND AFTER EATING—

ALWAYS USES THE SAME DISHES AND BOILS THEM IN WATER BEFORE WASHING WITH OTHER DISHES,—

AND SLEEPS ALONE.

(NEW YORK STATE DEPARTMENT OF HEALTH)



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The Bulletin

OF THE

California Association for the Study and Prevention of Tuberculosis

A BI-MONTHLY PUBLICATION

George H. Kress, M.D., Editor.

(Entered as second-class matter at the Postoffice at Sierra Madre, Los Angeles County, California.

The aim of this publication is to promote the study and dissemination of knowledge concerning the prevention and cure of tuberculosis, to aid in the establishment of institutions intended for those purposes, and to co-operate with such organizations as can render aid in the solution of the tuberculosis problem.

This Bulletin appears in January, March, May, July, September, and November.

This Bulletin is sent gratis to all persons who may be interested in the prevention of Tuberculosis, on application therefor; the aim of the publication being to spread knowledge concerning the prevention of tuberculosis, to the end that this disease may be prevented from causing loss of health or death to citizens of California.

Editorial Board consists of Dr. George H. Kress, Editor, Los Angeles; Dr. George H. Evans, San Francisco; Dr. Gayle G. Moseley, Redlands; Miss Annis Coffey, Sierra Madre, and Miss Gertrude Tucker, Sierra Madre.

Editorial contributions may be sent to the office of publication, care of Miss Gertrude Tucker, Manager, P.O. Box 141, Suffolk Ave. and Sierra Madre Place, Sierra Madre, Cal.

Notice Regarding Copy.—The Secretaries of local societies are expected to send reports of the work of their organizations to the Editor, Dr. George H. Kress, 240 Bradbury Building, Los Angeles, without further notice. Officers and members of the state and local societies are urged to forward communications that seem to them to be of interest and if means allow, the same will be published.

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DIRECTORY (See next page).

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* * *

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CALIFORNIA STATE TUBERCULOSIS SOCIETY WILL AGAIN ISSUE AN XMAS STAMP THIS YEAR.

At a recent meeting of the Executive Committee of the California Association for the Study and Prevention of Tuberculosis the matter of the Christmas Stamp was thoroughly discussed.

The conclusion finally reached was there was need of a State Christmas Stamp, and that a State Stamp would in no way interfere with the work for the prevention of tuberculosis in this commonwealth, but rather, if anything, that it would tend to accelerate the ends for which the different local tuberculosis societies (which were brought into existence from the State Association) were formed.

The design selected is one which should work out very well.

As heretofore, two-thirds of the fund received from the sale of these stamps will go to the local tuberculosis societies for local work, the other one-third going to the State Society to carry on its general work throughout the commonwealth.

In line with the previous policy of the State Association, this stamp will only be sold in those places having tuberculosis societies affiliated with the State Association, and which do not place on sale any other kind of Christmas Stamp.

In our next issue we hope to make a special feature of this stamp, giving designs and explaining the general nature of the campaign to be undertaken.

All who should wish to take part in the sale of such a stamp should address the Secretary of the State Association, 240 Bradbury building, Los Angeles.

**RESOLUTIONS REGARDING
ESTABLISHMENT OF SANATORIA.**

At a recent meeting of the Executive Committee of the California Association for the Study and Prevention of Tuberculosis,

the following resolutions were adopted as the sense of that body:

Whereas, It has been amply demonstrated that the careful consumptive (that is, one who destroys his germ-laden sputum and excreta before they come into contact with other persons) has eliminated whatever danger may be attached to his presence; and

Whereas, It has been shown, that in sanatoria (places of healing where consumptives are made to lead the mode of life most conducive to the prevention and cure of tuberculosis) the opportunity for the destruction of germ-laden sputum and excreta is best carried out; and

Whereas, As a matter of fact, because of such sane precautions, the tuberculosis sickness and death of employees of such sanatoria, is less in proportion than in the surrounding communities; now, therefore be it

Resolved, That it is the sense of the members of the Executive Board of the California Association for the Study and Prevention of Tuberculosis, that those who attempt to prevent the establishment of properly-conducted sanatoria, are not only in opposition to scientific facts, but that such persons are sacrificing human life on the altar of supposed material prosperity, (although it has been shown that property values in the neighborhood of properly-conducted sanatoria really increase in value); and be it further

Resolved, That this Executive Board deprecates the unwise action of all such persons, as being unscientific, inhumanitarian and illogical; and that all persons who will really study this question must come to the conclusion that the action of such persons is nothing else than an expression of tuberculo-phobia, and to that extent a menace to the great movement now in progress, which has as its end, the doing away with tuberculosis as a scourge to the human race.

ANOTHER EVIDENCE OF TUBERCULO-PHOBIA.

The Redlands Settlement for indigent consumptives, of which Dr. Gayle Moseley, the present president of the State Tuberculosis Association, has been for several years the medical director, bids fair to become a victim of tuberculo-phobia.

The Redlands Settlement is the oldest sanatorium in the State of California designed to aid indigent consumptives. Recently it purchased property at an advantageous price near the small town of Mentone in San Bernardino county. The location is very desirable.

Unfortunately, however, the inhabitants of this town have become affected with tuberculo-phobia, and have induced the San Bernardino County Board of Supervisors to pass an ordinance preventing the establishment of a tuberculosis sanatorium in that county within a certain distance of a residence, schoolhouse, etc.

The authorities of the Redlands Settlement explained to the inhabitants and to the Board of Supervisors that all necessary precautions for the destruction of the germs of tuberculosis would be taken, but seemingly to little avail.

What a pity that so many of the laity get mental indigestion in trying to comprehend the true nature of tuberculosis. These same people would, no doubt, allow any number of consumptives to come into the homes of their town, and infect one room after another, and raise not a single sound or protest, and yet when an institution organized primarily for the very purpose of preventing the spreading of the disease, equipped with the proper buildings, and having adequate professional attendants to instruct the patients as to methods of prevention, comes along and wishes to establish a charitable institution, these citizens become afflicted with a blind, unreasoning fear that is a credit neither to themselves nor to anyone else.

It seems to be, at this particular stage of the anti-tuberculosis warfare, that the half-knowledge which the laity has acquired concerning tuberculosis has led no end of laymen to persecute the honest, conscientious consumptive. This is a brutal return for the care that such a conscientious consumptive is making to prevent the infection of his fellow-citizens.

If people could only learn what powerful germicides the sunlight and even diffuse light and the circulating air are, and that such light and air will kill in a minute to several hours all tuberculosis germs exposed thereto, they could not do other than acknowledge the really little danger that would exist where patients take particular care to dispose of their sputum. This fact is supported also by statistics from sanatoria. This is a truth which we must emphasize more and more, and impress contrariwise the danger of house infection.

The usual thing that impels this adverse position by laymen is the fear of depreciation of property values, and yet, as a matter of fact, it has been shown that property in the near vicinity of sanatoria increases in value. The National Association for the Study and Prevention of Tuberculosis has called attention to this very fact in times past, and here in Los Angeles county we have a very particular instance in the little city of Monrovia, where property values have risen markedly after the establishment of a sanatorium.

Wherefore, both from the humanitarian and the material standpoints, we beg our fellow-citizens of Mentone, and also the Board of Supervisors of San Bernardino county, to look at this whole question in a rational, sane manner, and to follow that course which is their plain duty in the premises.

For them to do otherwise and act like tuberculo-phobics is for them to be untrue to themselves and to their district.

K.

THE SAN BERNARDINO COUNTY SUPERVISORS PASS DRASTIC ORDINANCE AFFECTING SETTLEMENT.

San Bernardino Sun: With the purpose of preventing the removal of the Settlement, the Redlands tuberculosis sanitarium, from San Timoteo canyon to Mentone, the Board of Supervisors yesterday passed an ordinance throwing certain limitations about locations of such hospitals which is designed to make the removal impossible.

The Settlement is the pet Redlands charity, an institution maintained for the care of the unfortunates who are victims of the great white plague, and who have not the means to pay for proper hospital attention. Once a year or so an entertainment of some sort is given by volunteer amateur talent which always results in a large sum for the maintenance of the institution, while Redlands people of wealth have always remembered it with substantial subscriptions.

Some time since it became possible for the directors of the institution to purchase the Mentone hotel, a large establishment which has not been operated successfully as a hostelry; so the purchase was at a bargain. But instantly there was a tremendous chorus of objection from the people of Mentone, as well as from many Redlanders, for the reason that a part of the Redlands domestic water supply flows in an open ditch through the very grounds that attach to that hotel, and therefore become a part of the proposed Settlement property.

The result was no end of protest, and the Board of Supervisors was appealed to. Supervisors Glover and Horton, who represent the districts affected, each gave heed to the objections and considered them well founded, and the result of the long drawn out agitation was action by the board yesterday. It was announced that the Settlement management is preparing to

refit the building, preparatory to occupying it. The only action the board could take was drastic, and it adopted an ordinance which, on the ground of public nuisance, prohibits the location of any hospital for the care of contagious or infectious diseases, within 600 feet of an open ditch the water of which is used for domestic purposes; or within 1200 feet of any other building occupied as a residence, or within 2640 feet of a school house. The proposed Settlement site violates all of these regulations, and it is to be expected that a strenuous court fight will follow, to determine whether the Board of Supervisors has power to adopt and enforce such a regulation. Mentone is not incorporated, so comes under the Board of Supervisors' control.

Dr. Gayle G. Moseley, president of The Settlement, was asked concerning the attitude which the organization may take in the matter, and he stated that the action of the County Supervisors came as a complete surprise to him and the other officers of The Settlement. Until he could inspect the ordinance as passed by the supervisors and consult legal authority he could not say what action, if any, would be taken. He had learned today that the residents of Mentone opposed to the removal of The Settlement to the Mentone Hotel had the matter all prepared for the consideration of the County Supervisors, and that they had adopted the ordinance as prepared for them.

Dr. Moseley further stated that he believed that the ordinance should not have been adopted without an opportunity having been given the officers of The Settlement for at least a chance for a hearing.

The act is known as Ordinance No. 141, and the full title of the document is as follows: "An ordinance regulat-

ing the location of hospitals, sanitariums, pest houses, asylums and other places maintained for the purpose of caring for or treating persons afflicted with contagious or infectious diseases."

The ordinance will become effective Friday, August 12, 1910. It was passed by the unanimous vote of the four supervisors present, Supervisor Pine being absent from the meeting—(*Clipping.*)

A CONSUMPTIVE TENANT—TUBERCULO-PHOBIA.

The *Pacific Outlook* recently contained the following interesting editorial, which fits in well with what we have said about the phthisis-o-phobia now in evidence at Redlands:

"Suit has been brought in the Superior Court of Los Angeles county for damages of \$2200 by a woman who owned a house which she rented through an agency, and the tenant had consumption in the family. The owner claimed that after death occurred and the tenant left the property, it was impossible to re-rent on account of the fear people had of contagion. The court (Judge Conrey) gave a decision for \$550 damages against the real estate company, who, it appeared, had been notified by the owner beforehand that they must not put a consumptive in the house.

"The verdict seems entirely just, especially in view of the specific notice given, and it is, moreover, a fact that a house that has once harbored a consumptive is difficult to rent. The public has come to understand that consumption is contagious, but it does not comprehend as yet the limitations that go with that fact.

"Thus, without knowing anything about the exact details of the case in question, we venture to say that the house which the consumptive occupied was thereafter the safest house in all that vicinity with respect to danger of contagion from that disease.

"The tenant was a physician and the sick person was his wife. No doubt the utmost care was used, and little or no contagion was created. When he left the house after his wife's death, for a very small sum it could have been, and probably was, given a thorough fumigation. Like enough also, it was redecorated. Under those conditions it contained absolutely no contagion whatever, and was undoubtedly the only house in that vicinity, or perhaps in the whole city, of which that could be said.

"A bit of dust so small as to be scarcely visible to the eye as it floats in the air may contain a hundred germs of tuberculosis. It comes into your house from the street where the wind may have carried it for miles, and it lodges on the picture molding. There it may remain in spite of 'dusting' or 'spring cleaning' for twenty years, to be thrown out finally and perhaps get into someone's lungs. There are in every house hundreds of convenient ledges and corners where germs can be undisturbed. The pneumatic cleaner brings out a lot of them, but it is not infallible. Fumigation alone does the business. (Sunlight and diffuse light and circulating air are even more important.—*Editor BULLETIN.*) It penetrates every crevice, finds the germ, thrattles him and chokes him to death.

"Probably a number of people who refused to rent the house which was the subject of this lawsuit, finally accepted ancient structures that were loaded down with germs, whereas this one was entirely clean.

"But the pendulum has swung far in the direction of fear, and it may be some time before it settles back to normal."

THE UNWARRANTED AND UNJUST FEAR OF TUBERCULOSIS.

BY DR. F. M. FOTTINGER, A. M., M. D., L. L. D.

There is a fear of tuberculosis which is distinctly warranted by facts. There

is also a fear of tuberculosis which has pervaded the minds of many people which is unjust and unwarranted. The great campaign of education which has been carried on by the Anti-Tuberculosis Societies during the last few years has accomplished great good. On the other hand it is attended by a certain amount of misinformation regarding tuberculosis, a certain amount of unjustified fear of the disease, and a considerable amount of injustice to the individual who is afflicted with the disease. The message of the Anti-Tuberculosis movement is—First: "Tuberculosis is a communicable disease." Second: "Tuberculosis is a preventable disease." Third: "Tuberculosis is a curable disease." This message carries with it both the hope of prevention and cure. Probably the chief source of infection in tuberculosis is from persons who do not know that they have the disease. The message of the Anti-Tuberculosis Movement is that the tuberculosis patient who knows that he has the disease and takes the proper hygienic precautions, is not a danger to the community. The laymen have failed to grasp this important fact and are doing an injustice to the conscientious tuberculous patient and putting a premium upon ignorance and carelessness by unwise discrimination against those who admit that they are tuberculous. A correct idea of its communicability must be understood in order to do justice to all concerned.

Tuberculosis is not a highly contagious disease. When we consider that it has existed from time immemorial, that those who are afflicted with it are expectorating millions and millions of bacilli daily and that the length of time that patients are expectorating bacilli is probably on an average, more than two years, and then when we further consider that during all the centuries practically no precautions were taken to prevent its spread, and in spite of this

the death rate has decreased, it shows that the disease is not a highly contagious one, as people are apt to think when they learn that it is communicable from one person to another.

Nevertheless, it must be distinctly understood that every new case comes from some previous case. Knowing the cause of tuberculosis, as we do today, and knowing that the tubercle bacilli develop only in the ulcers of the lung of patients suffering from advanced tuberculosis, and knowing that these bacilli for the most part are cast out through expectoration, we have at hand a practical method whereby the scattering of infection can be largely prevented, namely: the prevention of promiscuous expectoration and the destruction of the expectorated material.

It is a generally accepted fact today that if ordinary care is exercised by the tuberculous patient there is little danger of conveying the disease to others, and where special care is exercised, as it is in sanatoria, there is no danger of infection. The tuberculous patient is not in himself necessarily a danger. If he leads a hygienic life and cares for his expectoration according to approved methods, he is a perfectly safe companion with whom to associate. The careless tuberculous patient, however, who ignorantly or willfully disregards hygienic measures and takes no care of his expectoration, is a danger to those about him.

The history of the sanatoria of the world affords striking proof of the fact that the spread of tuberculosis can be prevented by living under ideal hygienic conditions. In these institutions where many people exist who are suffering from tuberculosis, those who associate with them do not acquire the disease. In all the history of the sanatorium movement, which now embraces many years and thousands and thousands of treated patients, there has been practically no cases of tuberculous infection

which could be traced to the patients themselves. Nurses, attendants and physicians, who mingle intimately and constantly with these patients, do not become tuberculous.

Further proof of the fact that tuberculosis patients when properly cared for, are not dangerous to the community in which they live, can be had from Davos, Switzerland. Davos is a small town of about 4000 inhabitants. It is visited annually by something like 30,000 people, most of whom are tuberculous. There are twenty-five sanatoria and boarding-houses where tuberculous patients are cared for. There is probably never a time when there are not more cases of tuberculosis in Davos than there are permanent inhabitants of the town, but strict hygienic measures are enforced. No patient is allowed to expectorate in the street. No room, which has been occupied by a patient, is allowed to be occupied until it has been fumigated. The patients being mostly in sanatoria, are taught careful personal hygiene, and those who are not are instructed by the physicians when they visit or by the keepers of the boarding-houses.

The result is that in spite of the great numbers of tuberculous patients who visit Davos, the mortality of the permanent population is exceedingly low, being only 9.7 per thousand, as compared with 22.5 in Germany.

It seems to me that the lesson from sanatoria in general, and from Davos, as a community, has shown that the fear of tuberculosis which is so rife is unwarranted and unjust. This is a problem that can be solved and solved right without doing injustice to anyone. The tuberculous patient should be instructed in personal hygiene. He should be taught how to live so that he will not infect those around him. He should be taught to carry out these instructions and if he does the community should

welcome him and give him the same rights as other individuals.

Sanatoria should be welcomed because they are taking out of homes tuberculous patients and placing them under conditions where there is practically no danger of spreading the disease. They should be welcome also because of the example which they set in hygienic living which leads not only tuberculous patients to regain health, but leads all people to become physically stronger and better able to cope with life's struggles.

POPULAR EDUCATION CONCERNING TUBERCULOSIS.

BY CAYLE G. MOSELEY, M.D.

The great campaign of education in regard to the cause and prevention of tuberculosis has been productive of much good and will result in the saving of thousands of lives. While prevention is the ideal for which we strive, yet there are many people who have been so unfortunate to contract the disease and the proper education and care of those who already have tuberculosis is the first step in preventing its spread.

This campaign of public education has had one very unfortunate result and that is it has aroused an exaggerated idea in the public mind of the danger of infection. Arguments and statistics seem to have no effect on this unreasonable fear which is both unjust and unkind.

The careful, cleanly consumptive has the right to associate with other people in the ordinary pursuits of business and pleasure. It is the dirty, careless consumptive that is a danger. He often coughs and expectorates on the street and in public places and passes along unnoticed, but if the careful, conscientious consumptive uses a sputum flask on the street or public place he is shunned as though he had the plague and is made to feel that he is an outcast from society. It is little wonder that consumptives are sensitive and often try to conceal their true condition when they are

made to feel that every man's hand is turned against them. Every one should honor and encourage the careful consumptive who has been properly instructed and who has the honesty to carry out these instructions, for he is not a danger, but on the other hand by his example he is a help in spreading the gospel of cleanliness and fresh air.

The public lecturer on tuberculosis is to some extent responsible for this extreme fear of the disease as it is difficult in a lecture not to over-state the dangers of infection, and in the beginning of this campaign of education it was necessary to emphasize the dangers of infection in order to get the public to "stop, look and listen." Now that they are warned of the danger and know how to prevent it they are very much like the man who refuses to cross the railroad track simply because he fears he will be hit by the train, although he may be assured that there is no danger. Just so people shun the careful and cleanly consumptive though they be assured that he is no menace to public health.

This prejudice in some localities has become so great that the people have objected to establishing open air schools for children who either have or are predisposed to tuberculosis. The results obtained in open-air schools have been so good that it is only a question of time when these schools will be to some extent adopted by every city and town of any considerable size in the country, especially in California where the climate is so favorable.

It is to be remembered that the great danger of infection is from the sputa from those suffering from consumption and if these persons are careful and use a flask or sputum cup and burn the expectoration before it has dried there is no danger from that source.

If any one sees or comes in contact with a careless or ignorant consumptive they should either speak to them or re-

port the matter to the health officer or to some member of the local Anti-tuberculosis Society. There are few places now, especially in California, where there is not some one sufficiently interested in this work who would take up the matter and see that the careless consumptive had proper instruction and insist that he carry out such instruction.

It has been proven that the clean, careful consumptive is not a danger and the public should insist that those suffering from this disease take proper precautions and in return they should receive that kind consideration from the public which will encourage them to act honestly and make their lives more hopeful.

WHY NOT CONSERVE OUR HUMAN RESOURCES?

The conservation of our natural resources is of great importance, the conservation of our coalfields, forests, water powers, mineral wealth, the development of good roads, the improvement of our national waterways, the conservation of the fertility of our soil, the conservation of our live stock, our horses, our cattle, our sheep, our swine, but far more important is the conservation of human life and of the physical efficiency of the American people.

Why conserve coal mines and not conserve the life of the coal miner?

Why conserve the cotton plant and expend five hundred thousand to fight the boll weevil and not conserve the people, who are to be clothed with the cotton?

Why conserve the orange tree and fight the San Jose scale and not conserve the people who eat oranges?

Why conserve the life of the forest and forget the life of the forester and of his children?

Why protect tree life and plant life and neglect human life?

Why protect cattle from Texas fever and not protect people from typhoid and malarial fever?

Why protect pigs and forget the children?

Everybody agrees to the wisdom of this proposition. The real question is how shall we accomplish this? I believe in a Department of Public Health, because, in *fighting disease and in fighting death due to preventable disease, it is a contest between intelligence and ignorance, and all the authority, dignity and power of the general Government must be put behind the truth and behind the best methods of dealing with disease in order to make the people realize its value and its truth.*—Senator Robert L. Owen of Oklahoma.

A PLEA FOR JUSTICE.

A plea for justice to the consumptive is being made by the Association for the benefit of the thousands of sufferers in Wisconsin.

Phthisiophobia, or the exaggerated fear of contracting phthisis, or consumption, is not only out of place, but unjust and cruel to the careful and conscientious consumptive. Some people, in their fear and prejudice, go so far as not only to consider the consumptive a physical danger, but also as mentally peculiar or something worse. This is absurd. The unfortunate consumptive often suffers more from this heartless, ignorant and cowardly fear than he does from the disease itself.

Let us get together and make every consumptive careful and conscientious. Infection is possible only through the sputum, or spit. Teach the patients to properly and safely dispose of their sputum and they are no longer dangerous.

It is a well-established fact that so far as contracting the disease is concerned, there is no safer place to live than in a tuberculosis sanatorium. In the largest and oldest sanatorium in the United States, no case has ever developed among attending physicians or nurses.

These are some of the evils of phthisiophobia, or the "consumption terror." It paralyzes the struggle against tuberculosis; it renders all measures against tuberculosis more difficult; it facilitates the spread of infection; it causes cruel behavior to consumptives; it is a sign of shameful cowardice; it causes us to overlook the real danger.

Let's be just to consumptives. Give them a helping hand. Don't make them objects of pity. Make them happy, hopeful and cheerful.—(*Wisconsin Bulletin.*)

THE YOUNG MOTHER AND THE FAT HOG

One time a little mother, who was only twenty-five years old, began to feel tired all the time. Her appetite had failed her for weeks before the tired feeling came. Her three little girls, once a joy in her life, now became a burden to her. It was, "Mama," "Mama," all day long. She never had noticed these appeals until the tired feeling came. The little mother also had red spots on her cheeks and a slight dry cough.

One day, when dragging herself around, forcing her weary body to work, she felt a sharp but slight pain in her chest, her head grew dizzy and suddenly her mouth filled with blood. The hemorrhage was not severe, but it left her very weak. The doctor she had consulted for her cough and tired feeling prescribed bitters made of alcohol, water and gentian. This gave her false strength for a while, for it checked out her little reserve. When the hemorrhage occurred she and all her neighbors knew she had consumption, and the doctor should have known it and told her months before.

Now she wrote to the State Board of Health and said: "I am told that consumption in its early stages can be cured by outdoor life, continued rest, and plenty of plain, good food. I do not want to die. I want to live and

raise my children to make them good citizens. Where can I go to get well?"

The reply was: "*The great Christian State of Indiana has not yet risen to the mighty economy of saving the lives of little mothers from consumption. At present, the only place where you can go is a grave.*"

"However, the state will care for your children in an orphan asylum after you are dead, and then in a few years a special officer will be paid to find a home for them. But save your life—Never. That is a cranky idea," for a member on the floor of the sixty-fifth Assembly said so. "*Besides," said he, "It isn't business; the state can't afford to."*

So the little mother died of the preventable and curable disease, the home was broken up and the children were taken to the orphan asylum.

A big, fat hog one morning found he had a pain in his belly. He squealed loudly and the farmer came out of his house to see what was the matter.

"He's got the hog cholery," said the hired man. So the farmer telegraphed Secretary Wilson of the U. S. Agricultural Department (who said the other day he had 3,000 experts in animal and plant disease), and the reply was: "Cert, I'll send you a man right away."

Sure enough, the man came. He said he was a D. V. S., and he was, too. He had a government syringe and a bottle of government medicine in his hand-bag, and he went for the hog. It got well.

It wasn't cranky for the government to do this, and it could afford the expense, for the hog could be turned into ham, sausage, lard and bacon.

Anybody, even a fool, can see it would be cranky for the state to save the life of a little mother, and it could not afford it either.

MORAL: *Be a hog and be worth saving!—(The White Crusader.)*

WHAT OTHERS ARE DOING.

The Anti-Tuberculosis League of King County, Wash., is to erect a sanatorium on 80 acres of land on the east side of Lake Washington, recently purchased by it.

Seattle raised \$6,000 for the relief of tuberculosis sufferers on button day.

The Canadian Government has doubled its appropriation to prevent the spread of tuberculosis.

The Tuberculosis Exhibit of New York, which gained the first prize at the International Congress of Tuberculosis, is to be shown in every district in the Borough of Manhattan, after being considerably improved.

A new tuberculosis sanatorium is to be erected on a hundred acres of ground near Denver by the nuns of the Order of St. Francis.

Mr. Andrew Carnegie has given 450 acres of land at Cresson, Pa., to the State of Pennsylvania, on condition that the State builds and maintains thereon a sanatorium.

By the sale of flags bearing the double red cross, Cincinnati netted \$17,000 for the Anti-Tuberculosis League.

During the year that has passed since the International Congress met at Washington, it is stated by the National Association for the Study and Prevention of Tuberculosis that one institution for the treatment or prevention of tuberculosis a day has been established. The increase in hospital accommodations is also marked, though it is yet inadequate. Over 1,000 beds for advanced cases have been established during the past year, but there are as yet only about 6,000 beds for 75,000 tuberculosis patients in the advanced stage.

The public drinking cup has now been officially abolished in Michigan, Mississippi and Kansas. Mandatory action is now under contemplation by Ohio, Indiana and Florida, while New York, New Jersey and North Dakota have all

issued bulletins condemning the common drinking cup as unsanitary and recommending the use of the individual cup. The following railroads are now using individual drinking cups: Pennsylvania; Boston and Maine; Lackawanna; M., K. & T.; Norfolk and Western; Ann Arbor; Cumberland Valley; Rock Island; Duluth, Missabe and Northern; Northwestern; Baltimore and Ohio; New York Central; Burlington; and New York, Ontario and Western. In most of the big department stores in New York, Philadelphia and Boston individual cups are provided, though the old public drinking cup is still doing business, except in the states

that have legally prohibited it. It is time that the public cup was prohibited all along the line.

At the Endowment Sanatorium for Consumptives, Baltimore, a new cottage for ten children is to be erected by Mrs. Henry Barton Jacobs at a cost of between \$10,000 and \$15,000. The offer is contingent on the public raising funds for its maintenance.

The City of Baltimore took over the tuberculosis work carried on for the past five years by the Instructive Visiting Nurses' Association, on Jan. 1, 1910. The Health Department will take charge, with a corps of fifteen nurses.



THE BULLETIN
OF THE
**CALIFORNIA ASSOCIATION FOR THE STUDY AND
PREVENTION OF TUBERCULOSIS**

A BI-MONTHLY PUBLICATION.

George H. Kress, M.D., Editor.

(Entered as second-class matter at the Postoffice at Sierra Madre, Los Angeles County, California.)

The aim of this publication is to promote the study and dissemination of knowledge concerning the prevention and cure of tuberculosis, to aid in the establishment of institutions intended for those purposes, and to co-operate with such organizations as can render aid in the solution of the tuberculosis problem.

This Bulletin appears in January, March, May, July, September and November.

This Bulletin is sent gratis to all persons who may be interested in the prevention of Tuberculosis, on application therefor; the aim of the publication being to spread knowledge concerning the prevention of tuberculosis, to the end that this disease may be prevented from causing loss of health or death to citizens of California.

Editorial Board consists of Dr. George H. Kress, Editor, Los Angeles; Dr. George H. Evans, San Francisco; Dr. Gayle G. Moseley, Redlands; Miss Annis Coffey, Sierra Madre; and Miss Gertrude Tucker, Sierra Madre.

Editorial contributions may be sent to the office of publication, care of Miss Gertrude Tucker, Manager, P.O. Box 141, Suffolk Ave. and Sierra Madre Place, Sierra Madre, Cal.

Notice Regarding Copy.—The Secretaries of local societies are expected to send reports of the work of their organizations to the Editor, Dr. George H. Kress, 240 Bradbury Building, Los Angeles, without further notice. Officers and members of the state and local societies are urged to forward communications that seem to them to be of interest, and if means allow, the same will be published.

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DIRECTORY (See next page).

International Tuberculosis Association

National (U. S. A.) Association for the Study and Prevention of Tuberculosis

California Association for the Study and Prevention of Tuberculosis

Local Affiliated Associations in California

(Arranged alphabetically)

Alameda County Society for the Study and Prevention of Tuberculosis

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Ms. W. H. Newman, 285.5.4.8. Phil. M. A. H.

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SECRET

Sierra Madre Society for the Study and Prevention of Tuberculosis

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ANNOUNCEMENT REGARDING THE CHRISTMAS STAMP OR SEAL OF THE STATE TUBERCULOSIS AS- SOCIATION

As announced in the last Bulletin, our State Association will again distribute among such of its affiliated organizations as wish to sell the same, a Christmas stamp or seal.

This will be the last stamp or seal which the State Association will issue. This step is taken in order to be in accord with the general effort of limiting the number of stamps on the market as much as possible, and would have been followed out this year, had not plans for this stamp been made a long time ago; and were it not for the fact that the need of having funds to continue the state organization work for another year were so imperative.

As is well known, the work of organization of the State Association and the publication of its bi-monthly bulletin and of miscellaneous educational literature has been carried on largely by funds raised from the sale of the said stamp, the bulk of the money coming from the Los Angeles district.



Two designs of the stamp are shown in this issue, the smaller design being that which was first thought of, and the larger design being a revision thereof.

The criticism of the smaller which was made was that people would not wish to send a "greeting" stamp which contained a reference to "sick people," and on that account the larger design, in which this reference is entirely omitted, was drawn.

The larger design also looks better in the colors, because the larger



amount of red gives a more pleasing impression. The size of the stamp will be just about the size of the small cut shown in this issue.

The stamp as designed (referring now to the larger cut in this issue) shows in the margins the green holly leaves and red berries, indicative of the Christmas and New Year season and the name of the city and state from which the stamp is issued.

Just beneath the name of the city is the phrase, "The Season's Greetings." This phrase, without a date, was used instead of "Merry Christmas and a Happy New Year" with the date, in order that merchants who buy these stamps might be able to use them at any time throughout the year.

In the center of the design proper is the double red cross of the society, which will be in red.

The remainder of the body of the design is an adaptation of the medal of the recent International Tuberculosis Congress, showing the Goddess of Hygiene with her foot upon the Dra-

gon of Disease, to indicate how Science has overcome Disease; holding aloft in the left hand the hour glass of time to show how man's days have been lengthened through the discoveries of Medical Science; and pointing aloft with the right hand to the Sun as the source of Life-giving Power and of Hope. We leave it to our readers to judge for themselves whether or not the design which the committee selected is artistic.

Now as regards the sale of the stamp or seal. The terms of sale will be the same as last year, viz.: That the local societies which wish cuts made with the name of their city printed thereon will pay one-half the cost of making such cuts, the state society to pay the other half. The local societies are also to pay the actual cost of printing the stamps. One-third of the net proceeds from the sale of stamps is to go to the state society, the other two-thirds being used by the local organization for its local needs. The state society will supply advertising literature, etc., gratis, and will also place the names of all members of all societies using the stamp on the bi-monthly bulletin mailing lists.

In regard to the plan of campaign. It is imperative that it should be inaugurated as early in November as possible, otherwise a great many letters and packages will be sent to the East without these stamps being placed upon them. The stamp committee of the different societies should send in their orders at once and then see to it that the newspapers are given a description of the stamp. An attempt should also be made to place the stamps on sale in the leading stores of the community. In addition to this plan, a very admirable method is to send to each member of the Chamber of Commerce or the Board of Trade of the city, a number of stamps, say one hundred, asking the merchant to buy them and place them

on his letters. If he does not wish to purchase them he can return them in an enclosed envelope. The same method of procedure can be followed with the leading women's club, sending a smaller number of stamps, say fifty, to each member, always enclosing a return envelope so that if the person addressed does not wish to take the stamps, they may return them without inconvenience.

One word of further caution is necessary and that is this—that this year the Federal Government has decreed that all Christmas "stamps or seals" of any nature whatsoever, **must be placed on the backs of envelopes and packages.** It is forbidden by the new postal regulation to paste these stamps or stickers or seals (the last name being perhaps the best term for these stamps) on the face of any envelope or of any package.

The best place for a "greeting stamp" is after all, not on the envelope, where it is hurriedly passed over by the person who opens the envelope, but on the letter itself, where it carries its message at the time the letter is being read and where its greeting is received every time the letter is referred to.

Those who wish any further information in regard to these stamps or of the purchase of stock stamps without the name of any city whatsoever, can obtain the same by writing to the Secretary of the Association, whose address is given in the directory of this Bulletin, 240 Bradbury Bldg., Los Angeles, Cal.

HOW THE DOUBLE RED CROSS ORIGINATED

International Tuberculosis Emblem Adopted in 1902

Although the double red cross has been used in America for more than four years as the international emblem of the crusade against tuberculosis, few people have known how it originated until announcement of the history of the symbol was made public today by the National Association for

the Study and Prevention of Tuberculosis.

It has been ascertained that the double red cross was first suggested as the symbol of the International Anti-Tuberculosis Association in Berlin in October, 1902. The proposer of the symbol was Dr. G. Sersiron of Paris, who is now Associate Secretary of L'Association Centrale Française Contre la Tuberculose. Dr. Sersiron's proposal was adopted at the Berlin meeting and a movement was at once started to secure official recognition and protection for the double cross from European governments.

The double red cross is similar in shape to a cross used frequently in the Greek Catholic Churches, and also to the Lorraine Cross of France. The National Association for the Study and Prevention of Tuberculosis in the United States has adopted the proportions of nine for the length of the cross to five for the width of the arms, with a space one-ninth of the length between the arms.

In 1902, when the double red cross was adopted, there were not more than a half-dozen associations for the prevention of tuberculosis organized on a wide basis. Today under the banner of the anti-tuberculosis crusade, associations have been formed in almost every civilized country in the world. Even China is beginning to take action along this line, while in Turkey, India, Japan, the Philippines, South Africa, Australia, Iceland, and in all of the European countries active societies are at work. In the United States, from four independent associations in 1902, the double red cross now enlists a carefully organized national movement under which are affiliated more than thirty state bodies and 420 local societies. If to these agencies are added the local, state and national governments enrolled in anti-tuberculosis work, the double red cross becomes the symbol of the greatest organized campaign for the prevention of disease that the world has ever known.

OPEN AIR SCHOOLS MUST BE PROVIDED

It is Poor Economy, a Waste of Public Money, the Time and Energy of Pupil and Teacher, to Attempt to Carry on the Education of a Child which is too Debilitated by Environment to Grasp the Teachings—Splendid Results Achieved by Existing Fresh Air Schools—Tremendous Influence Toward Sane School Architecture

BY MISS KATHRENE GEDNEY, A.M.

Editor's Note.—The following article has been taken from the Crusader of the Wisconsin Anti-Tuberculosis Association. Our California State Superintendent of Instruction, Professor Edward Hyatt, has issued an excellent booklet on the architecture of California schools, and has promised to write on this subject for the Bulletin.

If the East can inaugurate these schools, why should not every school in California be an out-door school? As a matter of fact, the architecture of California schools still follows Eastern ideas of years ago far too much.

If any of our readers will send us sketches of out-door schools for California, the Bulletin will be glad to print them.

If the open-air school deserves to become a permanent feature of our educational system, it must first have satisfied the people of its worth and based its claim for support upon a demonstration of its merits. That it has already done so is the unanimous testimony of all who have studied the open-air schools now being established in all of the larger cities.

Were the schools designed to combat tuberculosis alone, the fresh-air school would effect a saving to the country.

From the 6,400 school children dying annually from tuberculosis at the average age of 12½ years, our country sustains a loss of \$1,152,000 in wasted education alone. (Ayres.)

But the question has assumed broader proportions. The school children of today are the men and women of tomorrow, and only by careful attention to physical defects in their child-

hood, will they be equipped to withstand disease in their adult lives. Nor is it good economy to waste public money, time and energy of pupil and teacher in a vain effort to carry on the education of a child too debilitated by environment to grasp the teachings.

In the year 1904 the first open-air school was opened in Charlottenberg, a suburb of Berlin, Germany. Few educational innovations have made so popular an appeal. The need of a school designed to teach and cure de-

requirement and known as "fresh-air rooms."

The schools of the first type range from elaborately planned and equipped plants, to simple temporary arrangements on roofs of buildings, or in small tents, accommodating twenty-five or thirty pupils. In such buildings two sides only have been closed, as it has been found that the children live comfortably in low temperature, if protected from the wind. Other cities have found a tent ade-



AN OUTDOOR SCHOOL IN CHICAGO
A Splendid Demonstration of the Possibilities in Cold Weather
(How different would be this scene in California!)

bilitated school children was felt through Europe and America. In 1908 the first open-air school was established in Providence, R. I., which was quickly followed by schools in all of the larger cities of the union.

Two Types of Schools

The open-air schools are of two types, those in separate buildings especially designed for the purpose, and those in rooms, altered for the new

quate, the sides of which are rolled up, with some unoccupied dwelling house used as a shelter during inclement weather. Various cities have utilized unoccupied dwelling houses, with ample grounds, or abandoned ferry boats.

The second class of fresh-air schools, known as "fresh-air rooms," have been conducted in school houses, with some alteration of existing school rooms. The advantage of this has been that

any city may establish an open-air school through existing machinery. The best room for the purpose is one of southern exposure, from which one outside wall can be almost removed. This can be done by filling in the wall with long windows, hinged at the top. A less expensive method, but one not quite as satisfactory, is to simply cut the existing windows to the floor, substituting full length hinged sashes. In rooms of mechanical heating, the intakes may be cut off and hand regulations substituted for automatic mechanism.

Clothing the Pupils

It has been agreed by all that beneficial treatment can be given only by keeping the children well fed and warm. Each child should be equipped with warm woolen underwear, a heavy overcoat, a warm cap and mittens and a sitting-out bag.

For this purpose, Dr. Carrington has manufactured a sleeping-out bag which may be manufactured cheaply and easily. It has been found necessary to substitute felt slippers for the damp shoes in which the children arrive in school.

Adequate Feeding Important

All authorities agree that the success of the undertaking depends in large measure upon adequate and wholesome feeding. The number of meals a day should be adapted to the physical condition of the children. For tubercular children, three meals with two refreshments have been served. For anaemic or debilitated children, a noon-day luncheon has been considered adequate. In several "fresh-air rooms" a hot soup at recess has been served and the children allowed to return to their homes for dinner, although this has not been found to be as successful. But feeding must be adapted to the local circumstances, the physical condition of the children and the possibilities of proper nourishment in the homes.

Cost of Outdoor Schools

The cost cannot be given definitely. This depends on local circumstances and the policy of the school. The equipment of a "fresh-air room" is of slight expense. Often an unused building may be secured with no expenditure save repairs. The amount of clothing is influenced by local conditions and the ability of the parents to supply proper under clothing and outer garments. The cost of food is given by the Chicago school as 29 cents per day per child for three meals and two refreshments. When only anaemic children are cared for and one meal served during the day, the expense will be very much reduced.

Principles and Routine

The principles of the open-air school are less study, less instruction, more exercise and more oxygen. Movable desks or tables and chairs are substituted for the ordinary desks, while steamer chairs are supplied for the daily afternoon nap. Rest occurs between all recitations. Manual work, which keeps both fingers nimble and minds alert, is substituted for much of the routine of classes.

Splendid Results Achieved

From both physical and educational standpoints the open-air school has received enthusiastic endorsement. The records of several schools show an average gain in weight of one-half pound a week. From an educational point of view results have been no less encouraging. All the children enrolled showed considerable increase in mental alertness, attention and interest in work. Tardiness and absence disappeared almost entirely, and the discipline of the school room improved to a wonderful degree.

One of the most remarkable and unexpected results has been the demonstration that the ordinary school work was not only not retarded, but was wonderfully advanced.

Pupils giving less time to the ordinary class-room work of the school were found to make the grades more easily than the pupils in other rooms.

This is not strange. Open-air makes strength, activity, alertness and mental health. Even the most expert teaching is wasted in large part upon a child whose vitality is being sapped by bad air.

Sane School Architecture

If fresh air is good for our unsuccessful pupils, why deny it to the bright ones.

The inestimable value of this demonstration of sane school architecture has been only suggested. Sooner or later our school boards must come to realize that it is after all bad economy to patch up a damaged article while we remain indifferent to the great mass of children whose bodily vigor is being sapped by a poor and utterly inappropriate environment. When the general public has become aroused to a realization of the situation, we may hope that the "fresh-air rooms" will become a rule rather than a radical measure of reform.

A FEW FACTS ABOUT TUBERCULOSIS (CONSUMPTION)

Leaflet Number 7. (Illustrated Facts)

California Association for the Study and Prevention of Tuberculosis

The Nature of the Disease.

1. Tuberculosis is a Communicable Disease.
2. Tuberculosis is a Preventable Disease.
3. Tuberculosis is a Curable Disease.

What Do the Above Three Statements Mean?

- They mean: 1. That when persons who have the disease are careless, they may infect other persons.
2. That when people take proper precautions, the disease can be prevented.
3. That when persons who have the disease live the right kind of lives, they may be cured.

What Are the Causes of Tuberculosis?

First, a predisposing cause, that is, any mode of living which weakens the human body.

Second, an exciting cause, that is, a germ which gets into the human body, and which, in run-down persons, finds it an easy task to get a foothold and start the disease.

What is the Nature of the Germ or Exciting Cause of Tuberculosis?

The germ is a vegetable parasite, less than one five-thousandth of an inch in length. Its favorite place of growth is in the lung tissue of a person who is not in good health.

How May the Germ Be Prevented from Acting?

Simply by destroying the sputum. The spit of a consumptive in 24 hours may contain millions of these germs. Therefore, every consumptive should spit into cuspidors containing anti-septic solutions like lye or carbolic acid (1 to 20) or into cloths, or papers or spit cups that can be burned. Never, never, never, should a consumptive talk or cough into other people's faces, nor swallow the sputum, nor spit on the floor.

What is the Nature of the Accessory or Predisposing Causes of Tuberculosis?

Anything that lessens the strength or resistance of the body, predisposes to tuberculosis. These causes, roughly grouped, are weakness that comes either from overwork, overcrowding, underfeeding, vicious habits or previous diseases, like grippe and typhoid.

How May the Predisposing Causes be Prevented from Acting?

By living simple lives, that is, by working and sleeping in pure air (which means well ventilated workshops and rooms), by eating nutritious foods slowly, by getting sufficient rest and sufficient exercise, by avoiding fatigue whether from unnecessary or necessary work or tasks, by refraining from vicious habits, and by getting strong before going to work after an attack of some other disease like grippe.

What Are Some of the Symptoms of Tuberculosis?

The symptoms vary. At first there may be a cough that hangs on, with irregular appetite, tendency to tire easily, a slight afternoon fever, and perhaps some loss of weight. Later the above, with night sweats, pleurisy, blood-spitting, cough with expectoration, much weakness, loss of weight and other symptoms.

How May Tuberculosis Be Cured?

By doing the same things urged in the above paragraph, namely, by following the simple life in both body and mind. If you are in poor health, tire easily, have a cough that hangs on, go to see a physician and ask his advice. In the late stages the disease is most difficult to cure, but in the early stages the task is much easier and far less expensive.

Written by Dr. George H. Kress,
Los Angeles.

*This is Educational Leaflet number 7 (Illustrated Facts), issued by the California Association for the Study and Prevention of Tuberculosis. Single copies, one cent each. Larger lots, prices on application. Office of the Association, 240 Bradbury Bldg., Los Angeles, Cal.

Copies of this and other literature on prevention and cure sent gratis on application.

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THE BULLETIN
OF THE
**CALIFORNIA ASSOCIATION FOR THE STUDY AND
PREVENTION OF TUBERCULOSIS**

A BI-MONTHLY PUBLICATION

George H. Kress, M.D., Editor

(Entered as second-class matter at the Postoffice at Sierra Madre, Los Angeles County, California)

The aim of this publication is to promote the study and dissemination of knowledge concerning the prevention and cure of tuberculosis, to aid in the establishment of institutions intended for those purposes, and to co-operate with such organizations as can render aid in the solution of the tuberculosis problem.

This Bulletin appears in January, March, May, July, September and November.

This Bulletin is sent gratis to all persons who may be interested in the prevention of Tuberculosis, on application therefor; the aim of the publication being to spread knowledge concerning the prevention of tuberculosis, to the end that this disease may be prevented from causing loss of health or death to citizens of California.

Editorial Board consists of Dr. George H. Kress, Editor, Los Angeles; Dr. George H. Evans, San Francisco; Dr. Gayle G. Moseley, Redlands; Miss Annis Coffey, Sierra Madre; and Miss Gertrude Tucker, Sierra Madre.

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LEGISLATIVE NEEDS

In the Solution of the California Tuberculosis Problem*

By George H. Kreiss, M. D., Los Angeles, Cal., Secretary of the California Association for the Study and Prevention of Tuberculosis.

In the consideration of legislative needs for the prevention of tuberculosis, we must of necessity revert to a consideration of the causes of tuberculosis, because **preventive legislation implies the prevention of the causes of tuberculosis.**

Since the **causes of tuberculosis** resolve themselves into the **two major groups** of

One, the exciting or germ cause, without the presence of which there can be no tuberculosis, and

Two, the predisposing or those causes which lower the resistance of the individual so that the germ or bacillus of tuberculosis can get a foothold in his tissues.

it will be well to keep this classification in mind in the consideration of legislative measures for the prevention of tuberculosis.

* * *

In the consideration of the exciting or germ cause, we will briefly indicate preventive measures under the following sub-headings:

1. Compulsory Registration of all Consumptives.

2. Compulsory Fumigation of the Homes of Consumptives.

3. Free Examination of Sputum by City and State Health Officials.

4. The Care of Advanced Cases in County Hospitals.

5. The Care of Incipient Cases in State Sanatoria,
State Farms, and
Semi-Charitable Sanatoria.

6. The Care of Ambulant Patients in Dispensaries.

*Read before the Health Officers Association and Public Health League, San Diego, Cal.

7. The Forceful Removal of Ignorant and Willful Consumptives in Advanced Stages, to County Hospitals.

8. Anti-Spitting Ordinances.

Let us now briefly discuss each of the above factors:—

1. Compulsory Registration of All Consumptives.

In the mind of the writer, a law for the compulsory reporting of all tuberculosis patients should be stringently enforced. The names so reported to the Health Officer should not be open to public inspection, the idea being to allow the local and state health officials to gain an accurate idea of local and state morbidity due to tuberculosis rather than to give publicity to the names of the unfortunate victims of the disease. It stands to reason that until our health officials know who our tuberculosis citizens are or where they live, the spread of the disease will continue, since no educational or preventive measures can be instituted which would reach these persons. Let us support our local and state boards of health, therefore, in securing an efficient and early enforcement of such a compulsory registration law.

2. Compulsory Fumigation of Consumptives' Homes.

We need local and state laws which would permit the fumigation of houses in which consumptives have lived, without cost to the owners or those who rent the premises. This fumigation should be done without cost, because it is the ill ventilated and unsanitary homes of the poor who need this fumigation most, and these

are precisely the persons least able to pay for fumigation.

3. Free Sputum Examinations.

The city and state laboratories should make sputum examinations free. Every physician in the State should be able to have sputum of suspected patients examined free. The demonstration of bacilli in the sputa is a great aid in making patients take proper precautions.

4. The Care of Advanced Consumptives in County Hospitals.

A law is needed which would require our county hospitals to segregate their tuberculous patients. **Buildings for these patients need not be expensive.** In fact, properly constructed open air shacks are far better adapted for such patients, than expensive heavy buildings, with insufficient window space and poor facilities for ventilation. It would seem to be far wiser to treat these hopelessly advanced patients in institutions already erected and with administration staffs already organized, instead of trying to do these things anew at great expense for a much smaller number of patients. For unless the state or counties paid the railroad fare to a state sanatorium, most of these peniless and advanced consumptives would continue to go to county hospitals in which they live.

5. The Care of Incipient Patients.

The care of these patients may be considered under headings of

A. Care of Incipient Patients in County Hospitals.

B. Care of Incipient Patients in a State Sanatorium.

C. Care of Incipient Patients on State Farms.

D. Care of Incipient Patients in Semi-Public Charitable Sanatoria.

Let us consider each of those in turn.

A. Care of Incipient Patients in County Hospitals.—Incipient tuberculosis patients at county hospitals should be segregated and if possible made to live the out-of-door life in tent houses or shacks, instead of being herded with patients with other diseases, or with patients who have advanced tuberculosis. Efficient tent houses and shacks can be constructed at a very moderate cost.

B. Care of Incipient Patients in a State Sanatorium. We do not believe a large state sanatorium for tuberculosis patients advisable for California, and our reasons therefor are, that the several hundred thousand dollars necessary to erect, equip and carry on such an institution could be spent in a way to bring far larger results to our State in the fight against this disease. The greatest good to the greatest number should be kept constantly in mind. A single state sanatorium would soon be flooded by persons who contracted the disease in the East, unless a residence requirement of a year or more were insisted on. We are convinced also, that such an institution would not in any way surpass in work and results such institutions as the Redlands Settlement and the Barlow and Pasadena Sanatoria, even if its results could be made as good. A single state sanatorium could not reduce the cost per patient below these institutions, because they operate at minimum outlay compared to the kind of care given. It is better, also, to have many such institutions in which local residents voluntarily give their aid in solving the tuberculosis problem of the state, than to have a single institution whose salaried officials could hardly hope to secure equal interest.

C. Care of Incipient Patients on State Farms.—The suggestion has been made that the State provide one or more state farms on which colonies of consumptives could receive treat-

ment (a modification of the Pennsylvania plan of using the forest reserves for such purposes). If these farm colonies can be inaugurated without the expenditure of most or all the money for lands or buildings, the plan would be well worth considering. If, however, it meant the purchase of much land from interested land owners, and the erection of elegant buildings, etc., we might well be opposed thereto.

The excellent suggestion has been made that the **farm lands attached to the six state lunacy institutions** could be used to good advantage for a beginning in this work.

These six institutions are the Mendocino near Ukiah, the Napa near Napa, the Stockton near Stockton, the Agnew near San Jose, the Patton near San Bernardino, and the Sonoma near Sonoma.

All that would need to be erected would be a frame shack hospital modeled after the admirable type devised by Dr. Holden, director of the endowed Agnes Memorial Hospital at Denver. The building he has devised can be built for an extremely low sum and gives a maximum amount of air, sunshine and comfort. In fact, his \$300 beds in his shack units give more air and as much comfort as his \$3000 beds in the large stone main building.

The steward of the insane hospital on the farm of which each colony would be located, could purchase the supplies without extra cost for administrative work.

The only new employees necessary would be a physician in charge, a matron and several nurses and orderlies. In this way units of twenty-five patients could make a beginning of several such colonies throughout the state, thus allowing the patients to secure treatment comparatively near home.

Surely in private commercial life, advantage would be taken of such land ownership and administrative staffs. Why not, then, grant this aid to the

many unfortunate consumptives of this great state?

D. Care of Incipient Patients in Semi-Public Charitable Institutions.—

Up to the present time, California has nothing to be proud of as regards state aid in the solution of the tuberculosis problem. On the other hand, the entire state may well take pride in such institutions as the Redlands Settlement, the Barlow and Pasadena Sanatoria, which have been founded and have done magnificent work by the devoted efforts of small groups of philanthropic citizens.

A state law, at this time, permits the county supervisors to send patients to such institutions as the above, which may be approved by the State Board of Health, and to pay the sum of one dollar a day for their board and treatment.

This sum is, however, not enough, as it costs an average of \$10.00 a week in these institutions to care for each patient. This law should be amended to permit the payment of a total of at least \$1.50 to \$1.75 per day for such patient, this sum to be paid either in whole by the county supervisors or in part by the county supervisors, and the remainder by the state.

Certainly we must agree that the state would in this way get a far greater return for money spent on consumptive sick, than could result from the erecting of a single large sized state sanatorium. Moreover, the state cannot bring the cost of the treatment below that of these institutions, and still do good work.

6. The Care of Ambulant Patients in Dispensaries.—

If possible, the state should pass some law allowing the formation of county or city dispensaries, where ambulant cases of tuberculosis could go for diagnosis and treatment, somewhat after the plan in vogue in Pennsylvania. Such an arrangement would have the additional advantage of placing a direct respon-

sibility for looking after the tuberculosis patients on one or more public health officials in every community in the state. A nominal stipend could be given to the physicians who would have a clinic or dispensary hour one or more times a week. Or just as well, perhaps, the county medical association or the local tuberculosis society might be asked to supply the physicians gratis, allowing the stipend to get to a visiting nurse in connection with the dispensary. Such a plan as the above, in that it would give every community a group of persons having to especially look after the local tuberculosis situation, also appeals to us as more likely to give big and broad results than a single state sanatorium on which several hundred thousand dollars would have to be spent for the care of a comparatively small number of patients, while the great majority of ambulant patients among the poor have to go to their graves, often with little or no advice or treatment.

7. The Forcible Removal of Ignorant and Willful Consumptives to County Hospitals or Similar Institutions.—It is unfortunate, in one sense, that so much of this disease is found among the ignorant. Not infrequently patients are found who absolutely refuse to take adequate precautions to protect their families, neighbors or fellow citizens. For such, a law should be passed making it possible for the local or state board of health to transfer this type of patient to an institution where the care would be such, that the lives of other persons would not be endangered through such criminal negligence or willfulness.

8. Anti-Spitting Ordinances.—We believe a state law should be passed prohibiting expectoration on the floors of public halls, boarding houses, hotels and public buildings. We confess we are not so much concerned with expectoration into the streets, nor, if

our women continue to wear walking suits with short skirts, are we much afraid of the bad result of expectoration on sidewalks. We all know that sunlight, and diffuse daylight and circulating air kill the germs in a few hours. This fact, coupled with the other that the large volume of air in the open streets must greatly dilute the number of germs leads us to believe that only a small amount of tuberculosis is contracted from sputum expectorated on public highways. But in the closed room of a private residence or hotel or public building, where large numbers of the germs are repeatedly expectorated, the chance of infection must necessarily be much greater, hence the term "house and a filth disease," which is so applicable to tuberculosis.

* * *

In the consideration of the predisposing causes, a few preventive measures will be indicated as follows:

a. Protection of Food Supplies:

1. Milk.
2. Meat.
3. Bake-stuffs.
4. Pavement stores.

b. Disposition of garbage.

c. Proper housing.

1. Tenements.
2. Factories.
3. Hotels and Lodging Houses.

d. School Improvements:

1. Medical Inspection of School Children.
2. Open air schools.

e. Provision of Public Play-grounds and Recreation Centers.

f. General Publicity Campaign under supervision of the State Board of Health.

Owing to the length which this paper has already taken, it will not be possible to go into great detail concerning these and other factors which might be mentioned.

a. **Protection of Food Supplies.**—It stands to reason that the state has an obligation to its citizens to protect them from harmful foodstuffs.

1. **Milk.**—There is no food stuff which is worthy of more care than the production of a clean and safe milk from healthy cattle, for milk is a food stuff upon which our babies and invalids as well as other citizens but especially the former, must only too often rely.

The supervision of the milk supply is a hygienic and not an industrial problem. What care we whether a few thousand pounds of butter and cheese are produced by this state, in the face of the far greater and more sacred obligation of protecting our babies from disease, by giving them a clean milk from healthy cattle.

And yet at the present time, the Board of Dairy Commissioners is composed of dairy men who are almost entirely interested in the industrial phase of the dairy industry. Their authority should be vested in the State Board of Health and a law should be passed by the next legislature to that effect. A law is also needed providing for the compulsory tuberculin testing of all dairy herds. We do not ask that these cattle be condemned, but simply that the results of the tests be registered with the State Board of Health. If this were done for several years, the dairy men themselves would get rid of these tuberculosis cattle. In other words, they would educate themselves concerning the value of the test and would be only too glad to avail themselves of its knowledge. No sensible dairy man would wish to keep a diseased, non-profitable animal in his herd. Later on a more stringent law might be passed, but for the present this would be a real step forward, both educationally and otherwise, and would amply justify the inauguration of the method.

2. **Meats.**—Adequate abattoir in-

spection of meat supplies, both on the hoof and in the slaughter houses should be provided for by law.

3. **Bake-Stuffs.**—Our bakeries should be in properly constructed buildings, the employees healthy, and bake-stuffs carted through the streets should be protected from dust and filth.

4. **Open-Air or Pavement Fruit Stands.**—A state law is needed to insist that fruits and other food stuffs exposed on pavement stands be properly screened by mosquito or other netting, so that it would not be possible for flies and other vermin to carry infective agents from the sputa and other filth of gutters to the food-stuffs exposed on such stands.

b. **Disposition of Garbage.**—Garbage should be properly collected in closed containers, and if such garbage is fed to hogs, the state should have the authority to prevent tuberculosis or otherwise diseased animals in such garbage fed herds from getting into the market.

c. **Proper Housing.**—Our tenement and factory building laws need revision, and a law is needed insisting on proper cleanliness and adequate floor and air space and ventilation in the crowded boarding houses and hotels of our larger cities.

d. **School Improvements.**—The medical inspection of school children, for the segregation of the undertone students and the proper correction of physical defects, such as predisposition to tuberculosis, should be amply provided for and by law extended to all parts of the state.

More attention should likewise be given to the construction of our school buildings and the building laws on this subject should be so amended as to virtually make all school rooms so that they may be converted into open-air school rooms in pleasant weather.

e. **Provision for Public Play-Grounds.**—In a similar manner a state law should be passed permitting and en-

couraging cities and towns to provide adequate park and play-ground areas and recreation centers. All such agencies are of vital importance in the up-building of a physically stronger generation among our poorer classes.

f. **General Publicity Campaign Under the Supervision of the State Board of Health.**—Last, but not least, we need a large increase in the appropriation to the California State Board of Health, so that that Board may inaugurate and carry on an aggressive

educational campaign against tuberculosis and other preventable diseases along any lines which in the judgment of the Board and its officers may seem valuable.

* * *

These, ladies and gentlemen, are a few of the measures related to the solution of the tuberculosis problem of California, which are worthy of consideration and action by our next legislature.

240 Bradbury Bldg.

RIVERSIDE IN LINE WITH A TUBERCULOSIS SANATORIUM

From the Riverside Daily Press of November 30, 1910, is taken the following, which shows how Riverside is following the example of Redlands, Los Angeles and Pasadena in providing a proper institution for the care of its tuberculosis residents:—

TUBERCULAR SANATORIUM

Site of 57 Acres Secured

Subscriptions of Eight Public-Spirited Citizens Make Possible Announcement of Important Plans for Riverside.

Through the efforts of two of the city's physicians, backed up by the generosity of eight benevolent and public-spirited citizens, there is now assured for Riverside a first-class tubercular sanatorium, with ample land and the purest spring water, and a location unsurpassed for its scenic attractiveness and healthfulness. There is coupled with it, too, the advantage of a remoteness of situation that anticipates quite, if not all, of the objections that are apt to be entertained with regard to the establishment of an institution of this character in a community such as the City Beautiful.

The Box Springs Sanatorium is the name that has been selected to designate this new undertaking, which bids fair to solve one of the most vital problems the community has to con-

tend with. Fifty-seven acres of land, lying directly east of the city, at the end of Linden street, have been secured for the sanatorium. The site includes the F. D. Mears ranch, on which there is a spring which flows an inch of sparkling water. The tentative plans contemplate a quadrangle of cottages on the highest point of the property, within which would be located an open air amusement pavilion and a hospital. Without would be a community dining room and kitchen.

The citizens whose liberality has made the consideration of these plans possible include Mayor Evans, C. E. Rumsey, Frank A. Miller, Geo. F. Ward, James Mills, L. V. W. Brown, Geo. N. Reynolds and A. C. Lovekin. Something like \$8000 is assured for the beginning of developments. It is the hope of those who are fostering the enterprise that the board of supervisors may see its way clear to aid in cases that naturally come under its jurisdiction, and it is expected that the city will assist with its moral support, if not financially. The successful handling of this problem it is believed will be furthered by the fraternal orders and the churches, all of whom have to contend in their respective fields of activity with the onslaughts of the great white plague.

Careful readers of the Press will remember that the first public presenta-

tion of the need of a sanatorium of this character was made by County Health Officer Geo. E. Tucker, who appeared before the city council a number of months ago to urge its importance. Since that time, in conjunction with City Health Officer Griffith, he has devoted a large part of his time to the project, believing that the objects aimed at were well worth the effort put forth to secure them. To the public spirit and energy of these men and their faith in the feasibility of the plans that have so far been but briefly outlined, is due the progress that has been made to date. They have had the hearty co-operation and sympathy of Mayor Evans from the outset, and his faith in the merit of the undertaking is indicated by the amount of his subscription, which was the first to be made.

The Location of the Property.

Nestled up against the Box Springs mountain, due east from the city, within the amphitheatre formed by the solid cordon of hills on the north and east, and overlooking the city and the expanse of orange groves on all sides, no finer location could be imagined. White-hooded peaks glisten to the northwest; Riverside's mountain belt cannot be viewed to better advantage from any part of the valley.

The site is just four miles from the Riverside postoffice, and two miles from the outskirts of the residence section, securing to the sanatorium desirable isolation. The San Jacinto branch of the Santa Fe runs through the property, providing all needed railroad facilities. As the site is approached from the city there is a quarter-mile stretch along the railroad between the track and Linden street, that it is proposed to park.

The cottages will be of the double type, California bungalow style, arranged to permit of the patients living practically out of doors every minute of the day and night. Each

cottage will be equipped with toilet and bath. It is the plan to arrange them about the hospital and amusement pavilion in the form of a quadrangle.

Nucleus for Cottage Quad.

One large-hearted citizen has promised to erect and furnish one of these cottages every year, and eastern people of means to whom appeals have been made, have signified their intention of providing memorial cottages. It is the hope of those who have the project at heart that Riversiders, individuals as well as fraternal organizations and the churches, will see in the plan the solution of some of their problems and likewise erect memorial cottages.

The Problem and the Plan

One of the greatest problems that Riverside or any other commonwealth of the Golden State has to cope with is that of the handling of the tuberculosis patients who make the land of sunshine their haven of refuge. Medical men say it is a problem that should have federal or state control, and while all sections of the United States have this problem, like the poor, always with them, Southern California is a magnet for large numbers of those who have been marked for destruction by the dread destroyer.

Dotted through the community are the tents of the unfortunates who are fighting an unequal battle with tuberculosis. There are certain cottages in the city that are continually rented to this class of people; as soon as one succumbs to the ravages of the disease, the house is immediately taken by another victim.

It has been the business of the Bureau of Associated Charities to provide for those afflicted with tuberculosis, and the workers have been confronted with the difficulty of providing for the family when the wage earner is incapacitated, and of finding a place

where the head of the family may be cared for apart from the family, so that the disease may not be spread to them. With the father provided for, the mother would be in a position to do something for her children, and vice versa. The danger is not only to the family, but to the entire neighborhood, as flies entering adjoining residences carry the germs, which are deposited in the food in the kitchen and on dining tables and thus menace the families in the vicinity.

The sanatorium plan as proposed for Riverside would provide a place for the scientific care of every individual afflicted with tuberculosis in this community. No allurements are being held out to those from other states or other sections of this state. The institution expects to care only for bona-fide residents of Riverside, those who can establish proof of such residence. Those who would be eligible to take advantage of the sanatorium would have to show a residence in the state of one year, and in the county sixty days.

Those who have the means to pay for the accommodations and care to be provided, would be expected to pay an amount sufficient to meet all expenses, in addition to providing a margin to help make up the deficit occasioned by those who are unable to pay anything. Plans have been devised for caring for those who have not the means to pay the fixed charges, but these plans cannot be made public as yet.

Every door is shut against the victim of tuberculosis, and only the man with money is able to fight it effectively. Every hotel and rooming house and desirable house to rent is barred to these unfortunates. It is now known that if the battle is begun in time, the victim may be saved, but the fight will require about three years under the best possible conditions. The sanatorium idea as proposed to be worked out here will provide these

conditions at a minimum expense to those who can pay for the service, and precisely the same care will be given to those who cannot. The good of the patient as well as of the community is contemplated in the undertaking.

It is earnestly hoped by those fostering the enterprise that people of means in this city will respond as liberally as the eight original donors. It is understood that opportunity will be given citizens to learn of the plans entertained for the sanatorium and the scheme which has been proposed for conducting it.

This institution will be established, conducted and maintained for humanity, and not for profit. This is the motive that has inspired the promoters from the first, and is the strongest guarantee of its largest success and usefulness. As an evidence of good faith on this point, it may be said that even the medical attendants are not to receive a dollar for their services.

"Nothing is easier than to admit in words the truth of the universal struggle for life, or more difficult than constantly to bear this conclusion in mind.."

* * *

"Let it also be borne in mind how infinitely complex and close fitting are the mutual relations of all organic beings to each other and to their physical conditions of life."—Darwin.

* * *

"Uncleanliness must be reckoned as the deadliest of our present removable causes of disease."—Sir John Simon.

* * *

"Cleanliness covers the whole field of sanitary labor. It is the beginning and the end."—Dr. B. W. Richardson.

* * *

"If we neglect this subject we cannot expect to do so with impunity."—Michael Faraday.

THE GREETING STAMP OF THE ASSOCIATION

From a little pamphlet sent out by the Los Angeles Society in its appeal for support through the Christmas Stamp, the following excerpts are taken:



Free Helping Station and Tuberculosis Dispensary of the Los Angeles Society for the Study and Prevention of Tuberculosis. Located at 737 Buena Vista Street (North Broadway), Telephone Broadway 4538.

Attending physicians: Dr. George H. Kress, Dr. H. A. Huntoon and Dr. I. R. Bancroft.

Dispensary nurse: Miss Gertrude Tucker, 737 Buena Vista Street, Los Angeles. Broadway 4538.

Visiting nurse: Miss L. Grace Spring, City Health Office, City Hall. Main 605 or A-6845.

The Helping Station has its quarters in the Selwyn Emmett Graves Memorial Dispensary Building, and is designed to give aid and relief to indigent consumptives and by visitation to their homes, to better faulty environments; to teach the patients how best to cure themselves and how not to infect their surroundings, their families or friends, or their fellow citizens.

With over 700 deaths from tuberculosis in Los Angeles yearly, there are easily 2500 or 3000 consumptives constantly in the city. It has been shown that fifty per cent. of these are in meager financial circumstances or poverty stricken. It is highly important that these consumptives should be looked after. The Los Angeles Society for the Prevention of Tuberculosis was established for this work. It needs and is worthy of your support.

On the succeeding pages are presented some photos and brief histories of some of the unfortunate citizens who are depending on this organization.

THE PATHETIC HISTORY OF LITTLE ANNIE B., A CHILD OF FOURTEEN

From little Annie B., a child of about fourteen, with cruelly distorted spine, great angry swellings under each arm and with a cough that seemed to shatter every atom of the little body emancipated to the last degree, the following history was obtained:

The parents had come to one of the eastern cities of America from France in 1905. In 1906 the father had a sun stroke and his health failing rapidly, the family, consisting of father, mother and seven children, came to California. The father put his little savings into a small three-room make-shift house, and the mother tried to help by taking in washing.

One day a seemingly kind lady came and offered to take the eldest girl, little Annie, then twelve years old, into her home. This lady said she wanted Annie only for company at night because she was not strong and disliked being alone.

As this would allow little Annie to go to school, and at the same time mean one less mouth to feed at home, the parents readily consented, the six dollars a month which Annie received helping materially in buying clothing for the other children.

About sixteen months passed. Annie's benefactress was growing to be more of an invalid now and had quite a cough. Annie was forced to help with the lighter washing, like handkerchiefs, but just the things that she should not have had to touch.

Annie's health was not so good now and one day on one of her visits home she told her mother she had a lump on her back that was giving her pain. She was referred to the Helping Station of the Los Angeles Society and the case diagnosed as tuberculosis of the spine and lungs. The child was now at home and the visiting nurse found a family ignorant of the danger that they were living in. Under the advice of the nurse, a tent was erected within easy calling distance of the house and Annie and the mother were carefully instructed concerning the disposal of sputum and other precautions.

Although knowledge came too late to be of benefit to herself, little Annie always battled for the protection of her little brothers and sisters, driving them out of her tent as long as she could be on her feet, and after she became bed-fast, when the children would come into the tent, she would storm until assistance came to rid her of her innocent tormentors, who, too young to understand her frenzy when they persisted in running in, seemed to delight in their unwelcome visits.

The child lived less than six months after it was found she had tuberculosis. Just before she passed to the Great Beyond, she had an anxious talk with her mother in which she said, "Mamma, tell the children Annie didn't mean to be cross, she just didn't want them to get sick."

Many months have since gone by, but every child in the family is still sound and well.

If there were no Society for the Prevention of Tuberculosis, it is very possible that several of these children would have become infected and in that way condemned to unnecessary and preventable death.

* * *

Mr. P. J., Italian, formerly a ladies' tailor, now in the last stages of tuberculosis, has a wife and three children and was almost absolutely destitute.

After investigation it was found the children could be placed in the Kings Daughters Nursery, and with the assistance of the Associated Charities the family were moved into a little house near the nursery. A position was secured for the mother at \$9.00 a week, and food and treatment were given to the patient.

P. J. is making a brave struggle for life, but even though he be unsuccessful, it is a gratification to know that his children and wife need not die of the same disease. The Helping Station of the Los Angeles Society has helped to make this possible.

* * *

Mrs. A. H., a city mission worker, had la grippe and did not regain her strength. Upon examination it was found she had tuberculosis. A few friends, poor people all, rallied around her and attempted to supply her needs. Their resources, however, were inadequate. This poor woman had almost sacrificed her life in caring for the sick poor. She is now being given such aid as the limited means of the Society permit, and is making a brave effort to regain her health and again be of service to her fellows.



Mr. R.—Has advanced tuberculosis. In addition to two boys seen in photo, has an infant child.



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OF THE
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PREVENTION OF TUBERCULOSIS

A BI-MONTHLY PUBLICATION

George H. Kress, M.D., Editor

(Entered as second-class matter at the Postoffice at Sierra Madre, Los Angeles County, California)

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Editorial Board consists of Dr. George H. Kress, Editor, Los Angeles; Dr. George H. Evans, San Francisco; Dr. Gayle G. Moseley, Redlands; Miss Annis Coffey, Sierra Madre; and Miss Gertrude Tucker, Sierra Madre.

Editorial contributions may be sent to the office of publication, care of Miss Gertrude Tucker, Manager, P. O. Box 141, Suffolk Ave. and Sierra Madre Place, Sierra Madre, Cal.

Notice Regarding Copy.—The Secretaries of local societies are expected to send reports of the work of their organizations to the Editor, Dr. George H. Kress, 240 Bradbury Building, Los Angeles, without further notice. Officers and members of the state and local societies are urged to forward communications that seem to them to be of interest, and if means allow, the same will be published.

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DIRECTORY (See next page)

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(Ask Your Minister to Co-operate.)

NATIONAL TUBERCULOSIS DAY ON APRIL 30TH.

CHURCHES WILL FIGHT CONSUMPTION—HOPE TO ENLIST 33,000,000 COMMUNICANTS.

April 30th has been set aside this year as "Tuberculosis Day," and will be observed in 200,000 churches in the country in a manner similar to that of "Tuberculosis Sunday" in 1910, when over 40,000 sermons were preached on the prevention of consumption. In this first official announcement of the occasion made by the National Association for the Study and Prevention of Tuberculosis today, the leaders of the movement state that they hope to enlist all of the 33,000,000 church members in the country.

In one respect Tuberculosis Day will differ from Tuberculosis Sunday of 1910. Instead of requesting the churches to give to the tuberculosis cause a special Sunday service, the National Association is going to ask this year that meetings, at which the subject of tuberculosis and its prevention can be discussed, be held on Sunday, April 30th, or on any other day near that date, either in the week preceding or the week following. "What we want," says Dr. Livingston Farrand, Executive Secretary of the National Association for the Study and Prevention of Tuberculosis, in a report on this movement, "is to have this whole subject of tuberculosis discussed in all of the 200,000 churches of the United States at as nearly the same time as possible. This does not mean that a stated service must be given over to this work, though that might be desirable, but that any minister, or other authority whom he may invite, can present the problem to his congregation before or after his regular service, or on any day within the week preceding or following April 30th."

The National Association is planning to gather statistics from thousands of ministers, showing how serious a problem tuberculosis is to every church. These figures will show among other things the number of deaths last year from tuberculosis in the church congregation, and the ways in which the pastors are called on to minister to sufferers from this disease. It is planned also to issue millions of circulars and pamphlets on the prevention of tuberculosis, both from the national office and from the headquarters of the 450 anti-tuberculosis associations who will co-operate in the movement.

TUBERCULOSIS DAY.

(A letter from the National Tuberculosis Association.)

Dear Sir:

Tuberculosis Sunday in 1910 was such a success that the National Association for the Study and Prevention of Tuberculosis, after conference with clergymen of many different denominations, has decided to repeat the movement, but along slightly different lines, in 1911.

April 30th has been chosen as the day for 1911, and will be known as "Tuberculosis Day" instead of "Tuberculosis Sunday." Our idea in this change is to obviate the difficulties and objections which arose last year over laying too much emphasis on one day. It is planned this year to ask ministers and churchgoers to observe Tuberculosis Day on or about April 30th. This will allow sufficient elasticity so that no ecclesiastical or other objections need be raised. The main thing we desire is as nearly a simultaneous presentation of the tuberculosis problem in the churches of the country as possible.

In order that we may be able to furnish you with some new data on this question as it affects your congregation, we are asking that you fill out and return to us the enclosed blank. We shall, of course, inform you at a later date with regard to the results of this canvass. This information, moreover, will be regarded as confidential, and in no case will comparative statistics concerning individual churches, or denominations be made public.

Trusting you will continue to cooperate with us in the campaign

against tuberculosis, we beg to remain,

Yours very truly,
LIVINGSTON FARRAND,
Executive Secretary.

Church Mortality Blank.

1. Name of city? 2. Name and denomination of Church? 3. Name and address of minister? 4. Number of deaths in your congregation from all causes in 1910? 5. Number of deaths from tuberculosis in your congregation in 1910? 6. Number of communicants or parishioners on January 1, 1911? 7. Remarks.

A STUDY OF PARALLELS.

WHAT UNCLE SAM IS DOING.

Preventing Disease Among Bees.

Department of Agriculture Issues a Publication on the Subject.

Washington, Dec. 8.—Wide-spread prevalence of disease among honey bees in the United States causes a loss of \$1,000,000 annually to the beekeepers, and steps have been taken by the United States Department of Agriculture to reduce this loss to a minimum. For the benefit of beekeepers the department has just issued a publication containing a discussion of the nature of these diseases and their treatment.

The honey bee in the United States annually produces a crop of honey valued at about \$20,000,000, and there are vast opportunities for increasing this output. The loss caused by diseases, which have been found to exist in thirty-seven States, is a serious handicap. Loss of honey production due to the weakened condition of the colonies and the value of the colonies which die can be greatly lessened, according to the department, if active measures are taken to control the diseases.—Evening Post, N. Y. City.

WHAT UNCLE SAM MIGHT DO

Prevent Disease Among People.

There Is No Department in the Government to Make a Study or Issue a Publication on the Subject.

Wide-spread disease among people in the United States causes a loss of about \$3,000,000,000 annually. There is no National Department to reduce this loss to a minimum. For the benefit of those families suffering such losses, the government issues no bulletins containing a discussion of the nature of the diseases and their prevention.

The people of the United States annually earn \$25,000,000,000 (see "National Vitality") and there are vast opportunities for increasing this amount. The loss, caused by diseases which exist in every State, is a serious handicap to the prosperity of the nation. Loss of production, due to the weakened condition of families and of communities and due to the value to the nation of those people who now die prematurely, can be greatly lessened if active measures are taken to prevent the diseases.

GOOD NEWS.

TUBERCULAR SANATORIUM ASSURED FOR RIVERSIDE. Fund Provided for Open-Air Pavilion and Hospital.

Riverside, March 4.—The Box Springs Sanatorium Association is the name of a new organization formed for the purpose of establishing a first-class tubercular sanatorium at the foot of Box Springs Mountain, east of the city. The generosity of eight public-spirited citizens, among them the late C. E. Rumsey, who subscribed \$3000, has made this project possible. Dr. Thos. R. Griffith, City Health Officer, has been elected to fill the vacancy caused by the death of Mr. Rumsey.

The association now has title to something over fifty acres of land, and the tentative plans contemplate the erection of a quadrangle of cottages on the highest point of the property, within which would be located an open-air amusement pavilion and a hospital. Outside the quad will be a

community dining-room and kitchen.

Something like \$8000 is assured for the beginning of developments. Among those interested in the project, which it is expected will solve one of the most vital problems with which the community has to deal, are Mayor Evans, Frank A. Miller, Geo. F. Ward, L. V. W. Brown, Geo. N. Reynolds, James Mills and A. C. Lovekin.

The cottages will be of the double type, California bungalow style, arranged to permit the patients living practically out of doors every minute of the day and night. One citizen has promised to erect one new cottage each year, and it is thought the churches and fraternal organizations will co-operate by erecting cottages. The entire community is interested in this project to secure isolation for tubercular patients, whose tents are now scattered all about the city. The afflicted have been attracted from the East with the hopes of receiving benefit from the climate of this section.—(L. A. Herald.)

TUBERCULOSIS LEGISLATION—NOW OR LATER?

THIS APPLIES TO CALIFORNIA AS WELL.

The Wisconsin Legislature will not again be in session for two years, says the Wisconsin Crusader.

"Tuberculosis is too large a problem to be successfully solved by private organizations," says Dr. E. A. Ross of the University of Wisconsin. "If the great annual loss in Wisconsin through tuberculosis is to be wiped out, if the death of thousands of innocent victims is to be prevented, legislation must be enacted which will enable the State of Wisconsin to establish and maintain the machinery nec-

essary for the prevention and cure of tuberculosis."

The anti-tuberculosis crusade in Wisconsin has reached a crucial stage. Without the proper machinery for the cure of patients and prevention of infection, it is ironical to talk of necessary measures for the safe cure of consumptives.

This machinery can be obtained only through State legislation. Unless this legislation is enacted at this session of the Legislature, not only will the anti-tuberculosis cause receive an irreparable setback, but the thousands of tuberculosis victims, both of

chapter with this quotation: "It's a great chance, we find, to arrive to one's grave in this English climate, without a smack of a consumption, death's direct door to most hard students, divines, physicians, philosophers, deep lovers, zealots in religion. —Gideon Harvey (1672).

"It appears to me," says Huber, "that the quality of the genius of a great man, if he be consumptive, may be, in some cases, at least, affected by his disease; perhaps this is due to the effect upon the nervous system of the toxins evolved in the body by the bacillus—a weird condition, certainly. Robert Louis Stevenson's work would best illustrate, I think, this phase of the subject. Perhaps in this case the quality of genius to which I refer may be temperamental, and would have appeared equally if he had never been a consumptive."

Arthur C. Jacobson, M.D., has written an essay on "Tuberculosis and the Creative Mind," which appeared in the Medical Library and Historical Journal, and in the Aesculapian. He also sees the "quickening of genius" referred to by Huber.

"It's just vengeance, though terrible enough," says Jacobson, "is tempered with mercy, a mercy which, by way of compensation for the physical ravages with which we are all so grossly familiar, reveals itself in that saving grace, the *spes phthisica*, a trait which, with its associated general psychic excitation, has not only enabled the individual victims of tuberculosis to bear their burdens of disease most cheerfully, but has been a means of quickening genius, a fact wherefrom have flowed benefits that concern the whole world of intellect."

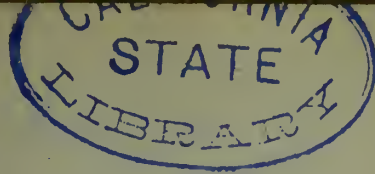
It is Jacobson's object to show that the disease has stimulated and benefited the work of many men and women. He says, however:

"To be sure, tuberculosis doesn't

convert all talented persons into geniuses, nor mediocre people into talented ones. Moreover, many geniuses have not been tuberculous. Again, tuberculosis is not infrequently a result, and not a cause, of literary industry, although in such instances it may prove to be an intellectual asset."

Tuberculosis is being fought even in Northern Korea, according to a recent report from Dr. Edwin M. Kent, received by the Methodist Board of Foreign Missions. Dr. Kent, who is a medical missionary stationed at Haiju, says that since he established a dispensary at the little hospital in that city, the people of the entire community are leaving their doors open at night, for few of the houses have windows. The native attendants at the hospital are now so accustomed to the regular instructions about fresh air that they call this sort of advice "yeggy," and at a sign from the doctor will dispense volumes of it to the unsuspecting sufferer. Such has become the hospital's reputation for fresh air advice that a native living in Haiju expressed himself as only waiting for warm weather before going to the hospital, "for," said he, "the doctor will urge me to leave the door open and that is very hard in cold weather."

The Italian government, on account of the number of tuberculosis cases among the Italian emigrants sent back from America, has appointed boards of examiners in the seaports, whose duty it is to report the arrival of tuberculous persons. These are then kept under observation in those places where they settle, to prevent further spread of the disease. The erection of new sanatoria and other tuberculosis institutions is being urged in Italy, and the number of beds for consumptives has been considerably increased in different places.



Volume III., No. 5, (New Series).

March-April, 1911.

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 Treasurer.....Gen. George M. Sternberg
 Secretary.....Dr. Henry Barton Jacobs
 Exec. Secy.....Dr. Livingston Farrand
 105 E. 22nd St., N. Y.

California Association for the Study and Prevention of Tuberculosis.*
 President.....Dr. Gayle Moseley
 First Vice-Pres.....Kenneth A. Millican
 Second Vice-Pres.....Dr. John Dryer
 Treasurer.....Mr. Charles H. Toll
 Secretary and Editor of the Bulletin.....Dr. George H. Kress
 240 Bradbury Bldg., Los Angeles.
 Santa Ana, Cal.

Local Affiliated Associations in California (Arranged alphabetically)

Alameda County Society for the Study and Prevention of Tuberculosis
 President.....Kenneth A. Millican
 First Vice-Pres.....Dr. Edward Von Adelung
 Secretary.....Miss Annie F. Brown
 320 First Nat. Bank Bldg., Oakland

Long Beach Society for the Study and Prevention of Tuberculosis
 President.....Dr. Chas. E. Bown
 Secretary.....Prof. M. A. Huff

Los Angeles Society for the Study and Prevention of Tuberculosis
 President.....Dr. Norman Bridge
 First Vice-Pres.....Edwin T. Earl
 Second Vice-Pres.....A. L. Stetson
 Secretary.....Dr. Donald J. Erick
 Wright & Callender Bldg.
 Treasurer.....R. W. Kenny

Monrovia (Visiting Nurses' Association)
 President.....Mrs. John H. Bartel
 Vice-President.....Mrs. M. L. Butts
 Vice-President.....Mrs. Hardy Harris
 Secretary.....Mrs. W. Judson Smith
 Treasurer.....Mrs. J. J. Renaker

Pasadena Society for the Study and Prevention of Tuberculosis
 President.....Dr. Henry Sherry
 First Vice-Pres.....Dr. Chas. Lee King
 Second Vice-Pres.....Mrs. Foryce Grinnell
 Third Vice-Pres.....Mr. C. B. Seoville
 Secretary.....Dr. E. H. McMillan
 Chamber of Commerce Bldg.

Redlands Society for the Study and Prevention of Tuberculosis
 President.....J. J. Suess
 Vice-Pres.....Dr. Hoell Tyler
 Secretary.....Dr. Gayle G. Moseley

Sacramento (White Cross Crusaders)
 President.....Dr. W. A. Briggs
 Vice-Pres.....A. Bonnhelm
 Treasurer.....C. M. Goethe
 Secretary.....A. L. Crane
 Director.....Frank T. Dwyer
 Director.....E. Chas. Hemmings
 Director.....W. F. Geary

San Diego Society for the Study and Prevention of Tuberculosis
 President.....Dr. J. A. Parks
 First Vice-Pres.....Dr. F. R. Burnham
 Secretary.....Mrs. Samuel Brust
 1669 First Street

San Francisco Association for the Study and Prevention of Tuberculosis
 President.....Thos. E. Hayden
 First Vice-Pres.....Dr. Herbert C. Moffit
 Second Vice-Pres.....Mrs. Jno. F. Merrill
 Secretary.....Dr. Wm. C. Voorsanger
 1547 Jackson Street
 Executive Committee—President, Secretary
 Treasurer Mrs. Jno. F. Merrill, Mrs. William H. Crocker, Dr. George H. Evans, Dr. Harry M. Sherman and Walter MacArthur

Santa Ana Society for the Study and Prevention of Tuberculosis
 President.....J. N. Anderson
 First Vice-Pres.....Dr. G. H. Dohson
 Second Vice-Pres.....Dr. Willela Howe-Waffle
 Third Vice-Pres.....Mrs. E. P. Nickey
 Secretary.....Dr. John Wehly
 Hervey Block

Santa Barbara Society for the Study and Prevention of Tuberculosis
 President.....Mrs. Huron Rock
 First Vice-Pres.....Dr. Rexwald Brown
 Second Vice-Pres.....Dr. Wm. H. Flint
 Secretary.....Dr. Benj. Bakewell
 Asst. Secretary.....Stanley C. Mason
 Treasurer.....Miss Marian Wallis

Sierra Madre Society for the Study and Prevention of Tuberculosis
 President.....E. W. Camp
 Vice-Pres.....Mrs. C. H. Baker
 Secretary.....Dr. R. H. Mackerras
 Treasurer.....George Humphries

*For officers of California Association for 1911, see page 12 of this Bulletin.

ANNOUNCEMENTS CONCERNING THE BULLETIN.

With this issue, which is virtually a double number, the publication of the Bulletin of the California Association for the Study and Prevention of Tuberculosis will be temporarily discontinued.

This action has been decided upon by the Board of Directors for two reasons:

1. The educational propaganda, for which particular purpose this Bulletin was brought into existence, has been in part fulfilled.

2. The finances of the Association do not permit the continued publication of the Bulletin.

It would have been pleasant to have continued the publication of this Bulletin (which, with this number will have reached the end of its 3rd volume) but the difficulty of raising funds is so great that it seemed hardly worth the effort, particularly since the numerous local Anti-Tuberculosis associations which have come into existence in California (largely through the instrumentality of the State Society), make it unnecessary in one sense, to continue the publication.

Later on, we believe that some such periodical will again come into existence, but at the present time, owing to the peculiar conditions in the tuberculosis situation in California, it does not seem wise to attempt to keep up this special line of work.

It may not be known to many of the readers of the Bulletin that this publication has been almost entirely supported by Los Angeles money. The funds for the active work which the State Association has carried on have, in fact, nearly all come from the city of Los Angeles. The local associations in Southern California have contributed, it is true, but hardly in

amount to defray the expenses of the propaganda campaign which has been carried on.

This is no reflection on the local associations, because their local needs have been so great and the difficulty of raising local enthusiasm so difficult a problem, that it has not been possible for these local units to raise the funds which would permit them to not only carry on local work, but to help in the broader effort to induce other communities to form local anti-tuberculosis units.

A few historical notes concerning the work against tuberculosis in California may not be out of place at this time:

The first organization to attempt, as a separate institution, to grapple with tuberculosis in California was that of the Barlow Sanatorium, of Los Angeles, which was incorporated on April 28, 1902, by Messrs. Poindexter, Francis and Hooper, and Doctors Bridge and Barlow. This institution completed its first buildings and received its first patient on September 1, 1903.

Next followed the temporary organization of the Southern California Anti-Tuberculosis League at Pasadena on December 3, 1902, under the leadership of Dr. F. M. Pottenger of Monrovia, the organization being made permanent at the first annual meeting held at the Y. W. C. A. Hall in Los Angeles, on June 2, 1903.

On January 31, 1907, at a meeting held in Los Angeles, the name of the Southern California Anti-Tuberculosis League was changed to The Southern California League for the Prevention of Tuberculosis.

At the meeting held at Pomona, Cal., on December 6, 1904, a committee to take steps for the formation of a State organization was authorized, but the efforts at that time failed of fruition.

On the occasion of the annual meeting of the Southern California League, held at Riverside, Cal., on December 3, 1907, a call for that purpose having been sent to many persons interested in the subject in California, it was voted to broaden the scope of the League by merging it into a State organization to be called The California Association for the Study and Prevention of Tuberculosis.

Mainly as the result, then, of the efforts of the State Anti-Tuberculosis Association, a large number of local anti-tuberculosis societies have come into existence. Thus the societies at Pasadena, Sierra Madre, Santa Ana, Long Beach, Santa Barbara and San Diego, were directly organized by officers of this association. The State Association also co-operated in the formation of several of the northern societies.

Through the influence of the State Association, several hundred thousand pieces of literature have been distributed. Several years ago the children in the schools of almost every southern county received anti-tuberculosis literature, and during this last year, in co-operation with the California State Board of Health an effort has been made to place in the hands of every child and teacher in every school in California a piece of anti-tuberculosis literature.

Thousands of the bulletins of this Society have been printed and have been distributed to members of the local societies and to the medical profession, and to the libraries and newspapers of the State.

Every other week during the last several years, its newspaper bulletins have been sent out by the State Association to every newspaper in the State and many of its articles have been copied, thus bringing a knowledge of prevention and cure to hun-

dreds of thousands of readers of these lay papers.

Many lectures have been given and ministers have been urged to give talks in their respective churches on the subject of tuberculosis.

Regarding legislation, this has been left largely to the local societies along the line of municipal legislation. It has not seemed desirable to attempt to do much in the way of State legislation, because the needs of the California State Board of Health were so great that it seemed unfair to get a special appropriation when the major needs of that body would thereby be imperiled. Then, too, thus far, the officers of the State Association have doubted the wisdom of establishing a single State Sanatorium, having a capacity for, say, one or two hundred patients and maintained at a large administrative expense. They have felt that the greatest need was to allow each county to have a sanatorium of its own in connection with its county hospital; and that if anything more than this was needed, that it would be wise to secure a law permitting the County Boards of Supervisors to care for patients in some benevolent sanatorium, such as the Barlow Sanatorium of Los Angeles, or the Redlands Settlement of Redlands. This whole matter of legislative needs regarding the tuberculosis problem of California was discussed in a recent issue of the Bulletin.

It will be seen, therefore, from the above that the State Tuberculosis Association has a record of honorable achievement in back of it and that it has been the influential factor in teaching the people of California concerning the nature of this dread disease. In addition, it has been instrumental in bringing into being a large number of organized local groups of citizens who are making a determined

fight against the disease. With the increase of these local societies, it is hoped that it will again become possible to unite on some common basis of support for the State Association and to carry on its work in an aggressive manner. Up to now, the work of the State Association has been the result of volunteers who were willing to give

their time and energy to this work. It is hoped that next year, if not before, it will be possible to present a means of organization whereby a paid director will take charge of the Association's activities. Certainly the tuberculosis problem of California is sufficiently serious to warrant such effort and without doubt such work is needed and will be done.

DIRECTORY OF ALL TUBERCULOSIS INSTITUTIONS AND ORGANIZATIONS IN CALIFORNIA.*

ASSOCIATIONS.

STATE ASSOCIATION

California Association for the Study and Prevention of Tuberculosis (1907): (Successor to the Southern California Anti-Tuberculosis Society, the seventh anti-tuberculosis organization in the United States):

Executive Office, 240 Bradbury Bldg., Los Angeles, Cal. President, Dr. Gayle G. Mosely, Redlands. Secretary, Dr. George H. Kress.

LOCAL SOCIETIES.

ALAMEDA

Alameda City Auxiliary to Alameda County Anti-Tuberculosis Society (Sept., 1909):

President, Dr. Weston O. Smith. Secretary, M. Lassen, 1223 High St.

LONG BEACH

Long Beach Association for the Study and Prevention of Tuberculosis (February 25, 1909):

President, Charles Brown, 211 First National Bank, Secretary, Dr. F. L. Rogers, 406 National Bank Bldg.

LOS ANGELES

Los Angeles Society for the Study and Prevention of Tuberculosis (1908):

President, Dr. Norman Bridge. Secretary, Dr. Donald J. Frick.

MONROVIA

Visiting Nurse Association of Monrovia (May 1, 1908):

President, Mrs. J. H. Bartle, Mayflower avenue. Secretary, Mrs. Harriet L. Snow, 158 Highland Place.

OAKLAND

Alameda County Society for the Study and Prevention of Tuberculosis (February 25, 1909):

Executive Office, 525 17th Street. President, Rev. C. Macon. Secretary, Miss Annie F. Brown. Assistant Secretary, Mrs. Helen Lotspeich.

PASADENA

Pasadena Society for the Study and Prevention of Tuberculosis (February 22, 1909):

President, Dr. Henry Sherry. Secretary, Dr. E. H. McMillan, Chamber of Commerce.

REDLANDS

Redlands Anti-Tuberculosis League (1908):

President, O. H. Hicks. Secretary, Dr. Gayle G. Mosely.

SACRAMENTO

White Crusaders (Oct. 13, 1908):

President, Dr. W. A. Briggs. Secretary, Thos. B. Leeper.

SAN DIEGO

San Diego Society for the Study and Prevention of Tuberculosis (1908, Incorporated May 9, 1910):

*Courtesy of the Directory of the National Association for the Study and Prevention of Tuberculosis.

President, J. A. Parks. Secretary,
Mrs. Samuel Brust, 1019 Date St.

SAN FRANCISCO

San Francisco Society for the Prevention of Tuberculosis (June 25, 1908):

Executive Office, 1547 Jackson St. President, Thomas E. Hayden. Secretary, Dr. William C. Voorsanger. Executive Secretary, Dr. R. G. Brodrick.

SAN JOSE

Tuberculosis Committee of the Association of Collegiate Alumnae of San Jose (November, 1909):

Chairman, Miss Gertrude F. Rowell, 222 South Priest Street. Secretary, Miss Laura Bailey, 419 North Fifth St.

SANTA ANA

Santa Ana Society for Study and Prevention of Tuberculosis (March 3, 1909):

President, Hon. John N. Anderson. Secretary, Dr. John Wehrly, 106½ East 4th Street.

SANTA BARBARA

Santa Barbara Anti-Tuberculosis Society (November, 1909):

President, Mrs. Huron Rock. Secretary, Mr. Stanley C. Mason, 724 State Street.

SIERRA MADRE

Sierra Madre Association for the Study and Prevention of Tuberculosis (March 12, 1909):

President, E. W. Camp, W. Grand View Ave. Acting Secretary, Dr. R. H. Mackerras, 146 West Central Ave.

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SANATORIA.

ALTA

White Crusaders Sanatorium (Aug. 1, 1909):

For incipient and moderately advanced cases. Capacity, 35. Rates, \$60 to \$100 per month. Superintendent and Medical Director, Dr. Burt F.

Howard. Application should be made to "The White Crusaders," P. O. Box 185, Sacramento, Cal.

BANNING

Doctor King's Sanatorium (Oct. 15, 1909):

For incipient, moderately advanced and advanced cases. Capacity, 15. Rates, \$15 per week. Medical Director, Dr. John C. King. Application should be made to the Medical Director.

BELMONT (San Mateo County)

California Sanatorium for the Treatment of Tuberculosis (June 15, 1910):

For incipient and moderately advanced cases. Capacity, 50. Rates, \$30 per week and upwards. Medical Director, Dr. Max Rothschild, 350 Post Street, San Francisco. Resident Physician, Dr. Agnes Walker. Application should be made to the Medical Director.

COLFAX

Colfax School for the Tuberculous (Dec., 1908):

For all cases offering hope of arrest. Capacity, 50. Rates, \$75 to \$100 per month. Superintendent, Dr. Robert A. Peers. Manager, J. E. Tade, 1001 The Telegraph Hill Neighborhood K Street, Sacramento. Application should be made either to the Superintendent or the Manager.

FAIRFAX (not yet in operation)

erect a Sanatorium in 1911 for 20 patients at Fairfax, Marin county. The Medical Director will be Dr. Philip King Brown, 350 Post Street, San Francisco.

LOS ANGELES

The Barlow Sanatorium (incorporated Sept., 1902):

For cases of pulmonary tuberculosis who have been residents of Los Angeles county for at least one year, who are without means to go else-

where, and who are capable of cure or marked improvement. Capacity, 44. Rates, \$5 per week for those who are able to pay and for societies and associations who wish to keep patients in the sanatorium. This price includes everything, including laundry, medicine, etc. Several are cared for free of charge. Medical Director, Dr. W. Jarvis Barlow. Resident Physician, Dr. R. L. Cunningham. Application should be made at the sanatorium, or 616 Security Building, Los Angeles, Cal.

Highland Park Sanatorium (November 14, 1910):

For incipient and moderately advanced cases. Capacity, 25. Rates, \$15 to \$30 per week. Medical Director, Dr. Neil Trew. General Superintendent, Miss Maude Summers, 5605 Hub Street. Application should be made to the Medical Director.

Kaspere Cohn Hospital and Training School, Stephenson Ave. (August, 1910):

For all classes of cases. Capacity for tuberculous patients, 10. Rates, There are no charges. Medical Director, Dr. Henry H. Lissner, 611 Lissner Bldg.

Los Angeles City and County Hospital (1886):

For advanced cases. Capacity, 120. Rates—There are no charges. Superintendent, Dr. Charles H. Whitman. Resident Physician, Dr. J. M. Duns-moore. Application should be made to county officials or at the office of the Associated Charities.

MONROVIA

Pottenger Sanatorium for Diseases of the Lungs and Throat (December, 1903):

For all patients that offer an opportunity of cure or of making material improvement. Capacity, 100. Rates, \$32.50 to \$52.50 per week. Superin-

tendent, Dr. F. M. Pottenger. Assistant Superintendent, Dr. J. E. Pottenger. Application should be made to the Superintendent.

NEEDLES

Needles Cottage Sanatorium (Dec. 24, 1908):

For incipient and moderately advanced cases. Capacity, 24. Rates, \$40 per week, \$150 per month. Medical Director, Dr. Charles A. Shepard. Application should be made to the Medical Director.

OAKLAND

Kings Daughters Home for Incurables (July 1, 1897):

Receives advanced cases. Capacity for tuberculous patients, 25. Rates, \$35 per month. Resident Physician, Dr. A. S. Kelly. President, Mrs. Matilda Brown. Application should be made at the Home.

PASADENA

La Vina Sanatorium for Tuberculosis (Aug. 22, 1909):

For patients in moderate circumstances or indigent who are residents of Pasadena and vicinity. Capacity, 35. Rates, maximum charge \$7 per week; patients pay what they can afford. Medical Director, Dr. Henry B. Stehman, 70 South Grand Ave. Resident Physician, Dr. Caroline McQuiston. Application should be made to the Medical Director.

Martyn Sanatorium

REDLANDS

The Mentone Sanatorium (Formerly The Settlement) (1901):

For all classes of cases. Capacity, 30. Rates, \$15 to \$35 per week; has a charity fund for the care of needy consumptives who have an established residence in Redlands. Medical Director, Dr. Gayle G. Mosely. Application should be made to the Medical Director.

RIVERSIDE

Box Spring Sanatorium (not yet in operation).—In December, 1910, an association of the leading citizens of Riverside was formed for the purpose of erecting a sanatorium at Box Spring, near the city, for the treatment of indigent consumptives resident in Riverside and vicinity. The institution will probably accommodate about 30 patients and will be erected in 1911. Hon. S. C. Evans, Mayor of Riverside, is leading the movement.

SAN FRANCISCO

City and County Hospital—Special buildings for all classes of indigent consumptives who are residents of San Francisco. Capacity, 150. Superintendent and Resident Physician, Dr. William R. Dorr. Application should be made at the Central Emergency Hospital.

The Diggins Sanatorium (August, 1909):

For all classes of cases. Capacity, 6. Rates, \$25 per week exclusive of medical fees. Medical Superintendent, Dr. Edward A. Diggins, 277 Devlsadero Street. Application should be made to the Superintendent.

SAN LEANDRO

Alameda County Infirmary (1903):

Receives all classes of cases. Capacity, 72. Rates—There are no charges. Superintendent, Dr. W. A. Clark. Physician in charge of tuberculosis department, Dr. Edward von Adelung. Application should be made to the County Supervisors.

SIERRA MADRE

El Reposo Sanatorium (Jan. 14, 1909):

For incipient, moderately advanced and advanced cases. Capacity, 60. Rates, \$15 to \$35 per week. Superintendent and Manager, Mrs. H. H. Lund. Resident Physician, Dr. George

S. Wells. Application should be made to the Manager.

SOLDIERS' HOME

Pacific Branch National Home for Disabled Volunteer Soldiers (1890):

For all tuberculous soldiers who have served in any war of the United States, and who have received an honorable discharge. Capacity for tuberculous patients, 50. Rates—There are no charges. Major and Surgeon, Dr. O. C. McNavy.

STOCKTON

Red Cross Tuberculosis Camp of San Joaquin County (July 10, 1909):

For incipient and moderately advanced cases. Capacity, 14. Rates, \$25 per month. Superintendent, Miss N. E. Wells. Medical Director, Dr. M. Goodman. Application should be made to the Medical Director.

Note—Since the above has been printed, our attention has been called to the Martyn Sanatorium at Pasadena of which Dr. George Martyn, Security Bldg., Los Angeles, is director; and to the Aregulpa Sanatorium of which Dr. Philip King Browne of 509 Union Square Bldg., San Francisco, is the medical director.

PENAL INSTITUTION.

SAN QUENTIN (Marin County)

California State Prison (March, 1906):

Capacity for tuberculous patients, 14. Physician in Charge of Tuberculosis Department, Dr. Ward J. Stone.

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OPEN AIR SCHOOL.

OAKLAND

Fruitvale School No. 2 (August, 1910):

For pre-tuberculous, anaemic, and incipient tuberculous children. Capacity, 25. Medical Director, Dr. N. K. Foster. Principal, W. D. Spencer. Supported entirely by City School Department.

INSANE HOSPITALS.

PATTON

Southern California State Hospital
(July 1, 1907):

Capacity for tuberculous patients,
36. Medical Superintendent, Dr. E. S.
Blair. Physician in Charge of Tuber-
culosis Department, Dr. Jessie H.
Simpson.

TALMAGE

Mendocino State Hospital:

Capacity for tuberculous patients,
100. Medical Superintendent, Dr. E.
W. King. Physician in Charge of Tu-
berculosis Department, Dr. G. D. Mar-
vin.

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DISPENSARIES.

BERKELEY

Tuberculosis Department, Berkeley
Dispensary, Kithedge St., (August 1,
1910):

Conducted by the Local Red Cross
Chapter. Hours: Weekdays from 9
to 11 a.m. Physicians in Charge, Drs.
J. N. Force, W. A. Sawyer and Clara
A. Williams.

LOS ANGELES

Los Angeles Helping Station for In-
digent Consumptives (August, 1906):

Conducted by the Los Angeles So-
ciety for the Study and Prevention
of Tuberculosis. Hours: Mondays,
Wednesdays, and Fridays from 4 to 6
p.m. Physicians in Charge, Dr. George
H. Kress, Dr. H. A. Huntoon and Dr.
Irving Bancroft.

OAKLAND

Dispensary of the Alameda County
Society for the Study and Prevention
of Tuberculosis, 525 17th Street
(1910):

Hours: Tuesdays, 9 to 10 a.m.;
Wednesdays, 11 a.m. to 12 m.; Thurs-
days, 7 to 8 p.m.; Saturdays, 11 a.m. to
12 m. Physician in Charge, Dr. Ed-
ward von Adelung.

SAN DIEGO

San Diego Tuberculosis Clinic, 611
G Street (June 23, 1909):

Conducted by The San Diego So-
ciety for Study and Prevention of
Tuberculosis.

Hours: Weekdays from 12 m. to 4
p.m. Superintendent, Miss Katherine
Hewitt, R. N., assisted by physicians
of County Medical Association.

SAN FRANCISCO

Tuberculosis Clinic of the San Fran-
cisco Association for the Study and
Prevention of Tuberculosis, 1547 Jack-
son Street (January 18, 1909):

Hours: Weekdays from 8:30 to 10
a.m. Secretary, Dr. R. G. Brodrick.

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LEGISLATION.

STATE LEGISLATION

1904—A bill appropriating \$150,000
for a State Sanatorium passed
both houses of the Legisla-
ture, but was vetoed by the
Governor.

1907—The Legislature passed a law
requiring the notification of
tuberculosis, but not distinct
from other communicable dis-
eases.

1907—Legislature passed an anti-
spitting law.

1907—Legislature passed an act ap-
propriating \$2000 for the dis-
semination of knowledge to
prevent the spread of tuber-
culosis.

1909—An appropriation of \$2000 was
granted to the State Board of
Health for a tuberculosis ex-
hibition campaign. A car con-
taining an exhibit has toured
all parts of the State.

1909—The State Board of Health
was empowered by an act of
April 14, to contract for the
treatment of indigent tuber-
culosis residents in private or

public sanatoria, the counties in which the patient resides to pay the bills. This act is in force until there is established in the State a State hospital for treatment of tuberculosis. **Secretary State Board of Health, Dr. W. F. Snow, Sacramento.**

MUNICIPAL LEGISLATION

Berkeley (40,434)

There is no local ordinance, but the State law is well enforced. By an ordinance of 1903, tuberculosis must be reported, but in 1909 only 14 cases and 49 deaths were reported. **Health Officer, Dr. J. J. Benton.**

Los Angeles (319,198)

On December 31, 1896, an ordinance prohibiting spitting in public conveyances, public buildings, and on sidewalks was passed. In 1902, tuberculosis was made reportable to the Board of Health. Premises are disinfected at death and removal. Printed circulars are distributed by the Board of Health. The city employs one nurse. **Health Officer, Dr. L. M. Powers.**

Oakland (150,174)

On December 7, 1903, the anti-spitting ordinance of 1899 was amended so as to prohibit spitting in any public place. In October, 1902, tuberculosis was classed with other infectious diseases and made reportable by physicians and householders. The law is enforced with good success. The Health Department disinfects after cases of death or removal. Circulars to patients and to physicians are distributed by the health authorities. **Health Officer, Dr. Edward N. Ewer.**

Pasadena (30,291)

There is an anti-spitting ordinance,

but it is not enforced. There is no local registration ordinance and the State law is not well enforced, 96 deaths and 17 living cases being reported 1909. **Health Officer, Dr. Stanley P. Black.**

Sacramento (44,696)

An anti-spitting ordinance passed several years ago, is "fairly well" enforced. Notification of tuberculosis cases was requested by the Board of Health in 1907. The request is "not very well" observed. Premises are disinfected only on request. **Health Officer, Dr. William K. Lindsay.**

San Diego (39,578)

A limited anti-spitting ordinance, passed in 1907, is enforced by the police and health authorities. A regulation of the Health Department of 1900 requires the reporting of tuberculosis with other infectious diseases. Premises are disinfected at death and removal of a patient. The department makes a free examination of sputum. **Health Officer, Dr. Francis H. Mead.**

San Francisco (425,000)

On March 15, 1897, an ordinance prohibiting spitting in public conveyances, on sidewalks, and in public buildings was passed. On October 27, 1903, tuberculosis was classed as an infectious disease and required to be reported. In December, 1909, a comprehensive registration ordinance was passed, and in 1910 over 1500 cases were reported. Premises are disinfected and free examinations of sputum made. **Health Officer, Dr. William F. McNutt, Jr.**

"Let us have faith that right makes might, and in that faith let us to the end dare to do our duty as we understand it."

—Abraham Lincoln

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FOR APRIL, 1911, TO APRIL, 1912.

OFFICERS AND DIRECTORS CALIFORNIA ASSOCIATION FOR THE STUDY AND PREVENTION OF TUBERCULOSIS.*

OFFICERS

President, Dr. George H. Kress, Los Angeles, Cal.
 First Vice-Pres., Dr. H. G. Thomas, Oakland, Cal.
 Second Vice-Pres., Dr. Robt. A. Peers, Colfax, Cal.
 Secretary, Dr. George Tucker, Riverside, Cal.
 Treasurer, Mr. C. H. Toll, Los Angeles, Cal.

DIRECTORS.

Dr. George H. Kress, Los Angeles, Cal., President.
 Dr. H. G. Thomas, Oakland, Cal., First Vice-Pres.
 Dr. Robt. A. Peers, Colfax, Cal., Second Vice-Pres.
 Dr. George Tucker, Riverside, Cal., Secretary.
 Mr. C. H. Toll, Los Angeles, Cal., Treasurer.
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Dr. F. M. Pottenger, Monrovia, Cal., Chairman Press Committee.

Hon. S. C. Evans, Riverside, Cal., Chairman Publication Committee.

Dr. W. Jarvis Barlow, Los Angeles, Chairman Dispensary Committee.

Dr. C. C. Browning, Monrovia, Cal., Chairman Consulting Medical Committee.

Dr. George H. Evans, San Francisco.

Dr. N. K. Foster, Oakland, Cal.

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Dr. John Dryer, Santa Ana, Cal.

Dr. Wm. C. Voorsanger, San Francisco, Cal.

Dr. Walter McArthur, San Francisco, Cal.

Dr. F. L. Rogers, Long Beach, Cal.

Dr. R. H. Mackerras, Sierra, Madre, Cal.

*Elected at the meeting at the Hotel Potter, Santa Barbara, Cal., April 19, 1911.

Dr. W. LeMoyne Wills, South Pasadena, Cal.

Dr. Henry Stehman, Pasadena, Cal.

Dr. W. P. Burke, Redlands, Cal.

Dr. E. A. Osborne, Santa Clara, Cal.

Dr. Rexwald Brown, Santa Barbara, Cal.

Dr. A. Bonnheim, Sacramento, Cal.

Dr. Wm. F. Snow, Sacramento, Cal.

Mrs. Nina Brust, San Diego, Cal.

Dr. John C. King, Banning, Cal.

Dr. Edward von Adelung, Oakland, Cal.

Dr. W. W. Roblee, Riverside, Cal.

Dr. R. S. Gibbs, San Bernardino, Cal.

Dr. John Dryer, Santa Ana, Cal.

Dr. George Tucker, Riverside, Cal.

Mr. Earl S. Carlton, Riverside, Cal.

Mrs. M. M. Pentoney, Riverside, Cal.

EXECUTIVE COMMITTEE.

The President, the Secretary, the Treasurer and the Chairmen of the Standing Committee.

HOW TO ORGANIZE AN ANTI-TUBERCULOSIS SOCIETY.*

In this, as in other things, there is a method of least resistance. The following plan commends itself because the Society can organize and elect officers in the course of a single evening, say at the close of a lecture on the subject of Tuberculosis.

* * *

MEMORANDA FOR THE PRESIDING OFFICER.

(The Committee in charge should give this sheet to the Presiding Officer, after it has decided who will make the motions, filling in the proper names, so the President and the meeting may transact its business and organize without delay. Even though this seems like making a "slate" it is necessary to adopt some such plan, if prompt organization is to be effected. The important point is to effect the organization, and then with enthusiastic officers you can then rest assured that the work will be taken care of.)

After the meeting is called to order, motions should be made as follows:

1. **First Motion.** A motion for the Acting President and Secretary will be made by.....
(Write name of person here, who is to make the motion.)

2. **Second Motion.** A motion for the organization of a Society and the adoption of a Constitution will be

made by Mr.....

3. **Third Motion.** A motion for the Nominating Committee of three will be made by Mr.....
The Chairman will appoint for this committee the following persons:

Mr.....

Mr.....

Mr.....

Note—It will be well for the Chairman and the committee in charge to have a list of officers and directors to be nominated, made out beforehand. Choose well-known men and women representing different groups in the community. The President, once elected, can later on appoint an Executive Committee which will do most of the work. (See By-laws.) The Nominating Committee should be persons who have a copy of, or who know the list of persons to be nominated for the different officers, provided for in the Constitution.

4. **Fourth Item.** The Nominating Committee begs leave to report.

5. **Fifth Motion.** A motion that the Secretary cast the ballot for the nominees presented by the Nominating Committee will be made by Mr.....

6. **Special Item.** Don't forget to have the ushers distribute blank slips of paper of membership slips before the close of the meeting, and ask

*Plan suggested by George H. Kress, M.D., Los Angeles, Cal.

those present who can to sign them. State that dues (make them only 25c, if advisable) can be paid at any time within the year.

Pass little slips like this throughout the audience during the meeting, asking all who can and wish to assist in the work to sign (and then have the ushers collect them as the audience passes out of the door).

The Undersigned agrees to become a member of the..... Society for the Study and Prevention of Tuberculosis, dues not to exceed (amount) \$..... during the current calendar year.

Name.....

Address.....

(Note.—Be sure to tell friends to second all proper motions. Avoid extensive discussion of constitution, etc.)

(Note.—The following is to be written, each motion on a separate sheet of paper, and these memoranda are then given to the persons present who will make these motions.)

* * *

FIRST MOTION.

This memorandum is to be given to Mr., who will make the motion for A Temporary Chairman and Secretary.

Mr. Chairman: I move that Mr. be elected Temporary Chairman and that Mr. be elected Temporary Secretary of the meeting.

(Note—If desired, the committee in charge can ask some person to preside, and this person can then call for the nomination of a temporary secretary only. Whoever presides can then put the above motion, and declare it carried.)

SECOND MOTION.

This slip is to be given to Mr. who will make the motion that a so-

cietly be organized and a name and Constitution adopted as follows:

Mr. Chairman: I move that it is the sense of the persons present that a Society to be known as the Society for the Study and Prevention of Tuberculosis be organized, and further that we who are here tonight, adopt as a Constitution and By-laws for our organization the Constitution of the Los Angeles Society for the Study and Prevention of Tuberculosis (as printed in the State Tuberculosis Bulletin substituting the name of our Society for that of the Los Angeles Society where necessary.

(See elsewhere in this bulletin for the Constitution of the Los Angeles Society. See Pages 15-19.)

THIRD MOTION.

This slip is to be given to Mr. who will make the motion for a Nominating Committee.

Mr. Chairman: I move a Nominating Committee of three be appointed by the Chair, and that this Committee bring in a report this evening, making nominations for the officers provided for in the Constitution and By-laws just adopted.

(Note—The Chairman will appoint the following persons:)

FOURTH ITEM.

This slip is to be given to Mr. Chairman of the Nominating Committee, who will report the names of the nominees:

Mr. Chairman: The Nominating Committee begs leave to present the following nominations:

For President
For 1st Vice-President
For 2nd Vice-President
For 3rd Vice-President
For Secretary
For Treasurer

(10 Directors)

- 1.
- 2.
- 3.
- 4.
- 5.
- 6.
- 7.
- 8.
- 9.
- 10.

FIFTH MOTION.

This slip is to be given to Mr.
who will make the motion providing
for the election of the persons nomi-
nated.

Mr. Chairman: I move that the
persons nominated by the Nominating
Committee be elected as officers of
this Society and that the Acting Sec-
retary cast the ballot of the Society
for the persons so nominated.

CONSTITUTION AND BY-LAWS OF THE LOS ANGELES SOCIETY FOR THE STUDY AND PREVENTION OF TUBERCULOSIS.*

CONSTITUTION.

Article I—Name.

The name of this Society shall be
"THE LOS ANGELES SOCIETY
FOR THE STUDY AND PREVEN-
TION OF TUBERCULOSIS."

Article II—Purposes.

The purposes of this Society shall
be:

1. The study and dissemination of
knowledge concerning the causes,
treatment and prevention of tubercu-
losis, particularly as it should be of
interest to the citizens of Los Angeles
and vicinity.

2. The promotion of the organiza-
tion and work of this Society in all
parts of the city and county of Los
Angeles.

3. The securing of the proper legis-
lation for the relief and prevention of
tuberculosis.

4. The encouragement of adequate
provision for consumptives by the es-
tablishment of sanitary hospitals, dis-
pensaries and otherwise.

5. The co-operation with the Na-
tional, State and District Associations
for the Study and Prevention of
Tuberculosis; with the public authori-
ties, such as State and local Boards
of Health, with medical societies;
and with civic and other organiza-
tions, in inaugurating, promoting and

developing approved measures which
aim at the prevention and cure of the
disease.

6. And in general, to do all things
and acts, having as their object the
relief of those afflicted with tubercu-
losis and the control and prevention
of this disease in our city and county
and elsewhere.

Article III—Meetings.

The meetings shall be held at such
times and places at may be directed
by the By-laws.

Article IV—Amendments

Amendments shall need a two-thirds
vote of those present at an annual or
special meeting, provided that written
notice of such proposed amendment
shall have been given to the Board of
Directors at least thirty days prior to
such meeting.

BY-LAWS.

Article I—Members

The members of this Society shall
be divided into six classes, viz: 1—
annual members (the unit of member-
ship); 2—subscribing members; 3—
patron members; 4— life members;
5—honorary members; 6—advisory
members.

1. Annual members are those per-
sons who pay annually to the Society
the annual dues of one dollar.

*The Constitution and By Laws of the Los Angeles Society are virtually a duplication
of those of the California Association for the Study and Prevention of Tuberculosis.

2. Contributing members are those who give supplies of any kind or money gifts of less than one dollar.

3. Subscribing members are those persons who in any one year pay to this Society not less than five dollars.

4. Patron members are those persons who in any one year pay to this Society the sum of not less than twenty five dollars.

5. Life members are those persons who in any one year pay to this Society the sum of one hundred dollars or more.

6. Honorary members are those persons who for notable services in the campaign against tuberculosis shall be voted as worthy of such honor.

7. Advisory members shall be those persons in the legislative, executive and judicial departments of our State, counties or cities, or in the clerical, medical, legal or journalistic professions, or in civic organizations or civil life who shall be voted into such membership by the Executive Committee.

Article II—Relation to National, State and District Associations.

The members of this Society shall be urged to strive for the fullest possible affiliation with the National, State and District Association for the Study and Prevention of Tuberculosis.

Article III—Suffrage.

1. All annual, subscribing, patron and life members shall have one vote each.

Article IV—Meetings.

1. The annual meeting of this Society shall be held during the month of January, time and place to be set by the Executive Committee. At this meeting shall be held the annual election of officers.

The order of business at this meeting shall be reading of the minutes, reports of officers and of the Executive Committee and other committees,

election of officers, old business, new business, adjournment.

2. Special meetings may be called upon the written request of at least ten members of the Society.

Article V—Officers and Committees.

The officers to be elected at this annual meeting shall be: a President; a 1st Vice-President; a 2nd Vice-President; a 3rd Vice-President; a Secretary; a Treasurer and ten directors.

The Board of Directors shall consist of the above named sixteen elected officers and directors, plus nine additional directors to be elected at the option of the aforesaid previously elected directors, thus making the board of directors when completed a Board of twenty five members. Seven members shall be necessary to constitute a quorum of the Board of Directors.

It shall be the duty of the Board of Directors to forward the work of the Society between meetings of the Society except in so far as it may delegate general and special work to the Executive and other committees.

The Board of Directors shall have the power to be deemed desirable to elect such honorary vice-presidents as it in its judgment seems best.

The Executive Committee shall consist of the President, the Secretary, the Treasurer and the Chairman of each standing committee.

The President of the Society shall be the Chairman of the Executive Committee. Five members of the Executive Committee shall constitute a quorum. To this Executive Committee shall be entrusted all the executive work of the Society in the intervals between meetings of the Society and the Board of Directors. The Ex-

It shall be the duty of the Executive Committee to forward the work of the standing committees and the Board of Directors between meetings of the Society except in so far as it may delegate general and special work to the Executive and other committees.

ecutive Committee shall have the power to fill all vacancies in the Officers or Board of Directors.

The following **Standing Committees*** shall be appointed by the President, his nominations being ratified by the Board of Directors or Executive Committee.

Each Committee shall consist of three members selected from the Board of Directors, one of whom shall have been designated as **Chairman** by the President.

Each Committee shall have the power to appoint such additional "advisory members" as it may deem wise for the purpose of better carrying on its work. The President and Secretary of the Society shall be ex-officio advisory members of all standing committees.

Each Committee shall elect its own **Secretary**, the said Secretary to keep the **minutes of the Committee** in a book provided for this purpose by the Society.

The standing committees, with their duties, shall be:—

1. **Finance Committee:** To devise ways and means of securing the funds to carry on the Society work.

2. **Membership Committee:** To secure new members for the Society.

3. **Press and Publicity Committee:** To prepare and secure publication in the lay and other papers of California of articles designed to educate the public as to the dangers of tuberculosis and aims and objects of the Society.

4. **Legislative and Law Enforcement Committee:** To secure the passage of needed legislation and the enforcement of existing laws designed to stamp out tuberculosis.

5. **Literature and Publications Committee:** To have supervision of the editing and publication of a paper and other publications and literature to inform the public as to the dangers

of the disease and the aims and objects of the Society.

6. **Hospital and Dispensary Committee:** To secure and co-ordinate efforts among sanatoria, hospitals, dispensaries, day camps and other institutions aiming to provide treatment and relief to persons afflicted with tuberculosis and to have general supervision of any such institutions of this Society, if no special committee for such purpose be appointed.

7. **Consulting Medical Committee:** To be an advisory committee on the medical phases of hospital, dispensary and other such activities.

8. **Lectures and Public Meetings Committee:** To arrange and have charge of lectures and public meetings, to inform the public as to the dangers of tuberculosis and the aims and objects of the Society.

The duties of the aforesaid officers and committees shall be those pertaining to their respective positions, provided that the **Treasurer** shall pay out no funds except on warrant signed by the Secretary, or other person authorized by the Board of Directors.

The Board of Directors shall not incur any indebtedness or liability for the Society, in excess of the amounts of funds in the hands of the Treasurer.

The aforesaid officers and committees shall hold office for one year or until their successors are elected.

Article VI—Advisory Council.

The Advisory Council of the Los Angeles Society shall be composed of persons as follows, who shall have been elected by the Board of Directors of Executive Committee:

First. The officers and directors of the Society.

Second. Officers or representatives of local medical societies, the number from any one society not to exceed three.

Third. A representative from the medical staff of every local tubercu-

losis institution (hospital, dispensary, sanatorium, day camp, etc.) and from the medical staff of every county or city or charitable hospital.

Fourth. A representative from the board of trustees or other executive authorities of any of the institutions mentioned in the preceeding paragraph.

Fifth. A representative from approved charitable, fraternal or civic organizations or institutions.

Sixth. A representative from such of the Health Boards of State, Counties, Cities or Towns of California as may be deemed desirable.

Seventh. The Health Officers of the State and of such Counties, Cities and Towns of California as may be deemed desirable.

The Advisory Council shall meet at the time of the annual meeting of the Society, and at such other times and places as may be deemed desirable by the President or Board of Directors. The Council shall select its own **Chairman**, but the President of the Society shall be honorary chairman of the Council.

The duty of the Advisory Council shall be the promotion of the work of the Society as far as possible.

Article VII—Amendments.

Amendments of the By-laws shall require a two-thirds vote of the members present at an annual or special meeting of the Board of Directors; provided that such amendment must be approved by the Society at its next meeting.

EXTRACTS FROM THE CONSTITUTION AND BY-LAWS OF THE CALIFORNIA ASSOCIATION FOR THE STUDY AND PREVENTION OF TUBERCULOSIS.*

BY-LAWS.

Article I—Members.

2. **Affiliate members** are those persons who have paid to local societies the annual dues of such local societies; provided that the sum of twenty-five cents from each of such person's local dues shall be remitted to this Association by the respective local society for the said person's affiliate membership in this Association.

Article II—Relation to Local Societies.

Any local society organized for the same general objects as indicated in the constitution of this Association shall be eligible for affiliation as a local subdivision of this Association, provided, however,

That when such a local subdivision, or society, desires to be known as being affiliated with the **California Association for the Study and Pre-**

vention of Tuberculosis, it shall pay to the State Association, the sum of at least twenty-five cents from the local dues of every member, all such members receiving in return for such financial aid, the privilege of affiliate membership in the State Association, and the "Bulletin" of the State Association; with the right to use the double red cross of the Association, and shall be granted also the right of suffrage, through delegates, in the proportion as indicated in Section 3 of Article III of these By-laws.

It is desirable that each local organization, for the sake of uniformity and harmonious effort, have as its name "The.....Society for the Study and Prevention of Tuberculosis," and to adopt as its Constitution and By-laws, a form modeled after those of the State Association.

Each local subdivision, or society, is also requested to place the Litera-

*The Constitution and By-Laws of the Los Angeles Society are almost the same as those of the State Association, except as above noted.

ture and Publications Committee of this Association on the Advisory Council of its own Literature and Publications Committee, and further to consult, if possible, the members of the said State Committee on any new literature of a general nature to be issued by such local society.

Article III—Suffrage.

1. Any person who pays the annual dues of one dollar shall be given the unit of suffrage, i. e., shall have the right to one vote. The units of suffrage shall be divided among the members as follows:

1. Annual, subscribing, patron and life members shall have one vote each.

2. Each affiliated society shall be permitted to have one vote for every fifty or major fraction thereof, of its members whose pro rata of local dues shall have been paid to the State Association by such society, as provided for in Article II; provided that every affiliated society of less than fifty members shall have at least one vote.

3. Each affiliated society may be represented by one or more delegates from its membership, provided such delegates present credentials signed by the President or Secretary of each local society.

4. The accredited delegate or delegates from each affiliated society shall have the privilege of casting the entire vote to which such local society may be entitled according to Section 2 of this Article.

Article V—Meetings.

1. The annual meeting of this Association shall be held during the month of April, the exact time and place to be set by the President or Executive Committee. At this meeting shall be held the annual election of officers.

WHAT HAS BEEN ACCOMPLISHED BY THE WORK OF THE ANTI- TUBERCULOSIS ORGAN- IZATIONS?

F. M. POTTINGER, A.M., M.D., LL.D.
Monrovia, California.

Tuberculosis has been considered an International Problem now for twelve years. It assumed this importance only after the Berlin Congress in 1899. During this brief period much has been accomplished. The disease with its problems has been brought to the attention of the people of all civilized countries, and the truths regarding its communicability, prevention and curability have been widely disseminated.

It is pertinent to ask, what has been accomplished by all this agitation? Are fewer infections occurring now than formerly? Are fewer cases of infection going on to the production of open tuberculosis? Are more patients suffering from the disease being cured? Is the lot of the tuberculous patient being made lighter than it used to be? How much of this change can be traced to the general movement for the study and prevention of tuberculosis?

These questions are difficult to answer because it is not easy to positively trace effects to their rightful causes. Whether there are fewer infections now than formerly is not easy to determine. We know that very few people pass through life without being infected with tuberculosis. Hamburger tested all children coming to the St. Anne's Children's Hospital in Vienna and found that ninety-five per cent. of them had become infected before they had attained the age of fifteen years. It would seem from this that, since nearly everyone is infected by tubercle bacilli during life, and only about one in nine or ten die of the disease that prevention resolves itself into a double

problem; first, personal hygiene of the tuberculous patient so that opportunity of infection will be minimized; and second, improving the standard of living so that even although infection has occurred, the individual will be strong enough to overcome it and prevent it from becoming serious.

There are unquestionably fewer cases of advanced tuberculosis than formerly, and while this is partly due to the improved standards of living, as shown by a steady decrease in the number of deaths not only from tuberculosis, but from diseases in general during the past fifty years, yet we are justified in believing that the teachings of the anti-tuberculosis societies have had a marked effect; and that they will show even greater results in the future. Pennsylvania formed the first society for the Study and Prevention of Tuberculosis in 1892, and Philadelphia has carried on the longest and most persistent campaign against this disease of any city in the United States. Here is her showing:

Year	Population	Deaths from Tuberculosis	Death rate per 1000 population
1880.	847,170	2,677	3.16
1890.	1,046,964	2,929	2.79
1900.	1,293,697	2,990	2.31
1910.	1,549,008	2,873	1.85

The reduction of the death rate in this one city from what it was in 1880 to what it was in 1910 represents a saving of 2,021 lives for the single year of 1910. This concrete example should inspire all workers with hope. The intelligent teaching of the truths about tuberculosis is sure to bear fruit.

Those suffering from tuberculosis are being offered a much greater opportunity for cure than formerly. Ten and twenty years ago very few people believed that it was possible to cure a patient of tuberculosis. If the pa-

tient regained his health that was a sure sign that he did not have the disease. Today, intelligent treatment under most favorable conditions such as are found in sanatoria is offering health to from sixty to ninety per cent. of early cases. In spite of this, however, the disease is still woefully mistreated. The responsibility for this mistreatment must be shared by both physicians and laymen. It is difficult to make a diagnosis in early tuberculosis, and very often the physician overlooks it. But when he has made a diagnosis, he receives very little encouragement or very little thanks from his patient or his patient's family. They know the doctor is mistaken and will often go to another or still another physician until they find one who will tell them that tuberculosis is not present. The laymen must learn to appreciate the fact that a person suffering from beginning tuberculosis does not appear sick, is not emaciated and does not have a severe cough. He looks very much like ordinary well folks. He usually tires easily, sometimes has frequently and usually protracted colds and feels "run down." When the diagnosis is made early the patient should appreciate it and welcome the knowledge, and at once take advantage of modern methods of treatment. Nothing short of the closest co-operation of physician and layman will make early diagnosis possible and cure the rule, instead of the exception. While tuberculosis is being treated better than formerly, thanks to the anti-tuberculosis movement, those suffering from it are still far from receiving what science is able to give them and what they will receive when they cease fearing to have an early diagnosis made.

The lot of the tuberculosis patient, I regret to say, has not been made easier by the teachings of the anti-

tuberculosis societies. On the contrary it has been made harder.

The principle first grasped by the layman is that "tuberculosis is communicable," therefore the natural corollary, "the tuberculosis patient is a danger." The more important truth that carefulness on the part of the patient under proper hygienic surroundings, takes away practically all danger of infecting others is not grasped. Consequently the careful and careless are wrongly classed together in the minds of the people and a premium is placed upon ignorance, carelessness and deception. It is the urgent duty of anti-tuberculosis societies to emphasize the fact that the conscientious tuberculosis patient is not a danger and urge respectful humane treatment for him at the hands of his fellow men. There is no necessity for a general unmodified fear of tuberculosis, but there is an urgent need for encouragement for the conscientious tuberculosis patient who is taking precautions against infecting his fellow men.

To measure the concrete results coming from the anti-tuberculosis crusade during the past decade is impossible. How many fewer infections and deaths are resulting from our activities we do not know, but we do know that our teachings are in line with progress. They are in harmony with the most advanced knowledge of hygiene and sanitation. They are comprehensive in their scope. They begin with the hygiene of the infant. They include pure milk and hygienic school houses with ample play grounds for him during the school hours; more sanitary and better ventilated houses; better personal hygiene; hygienic tenements and working rooms; more park space for the cities; shorter hours of work for man, woman and child, the employee and the employer alike. They are such teachings as will not only prevent

tuberculosis but make the entire race stronger and more resistant to all disease.

California formed her first society, the Southern California Anti-Tuberculosis League, in 1892, which was merged into the California Society for the Study and Prevention of Tuberculosis in 1908. Since the founding of the Southern California Anti-Tuberculosis League every city in the south, as well as many in the north, has formed local societies, hundreds of lectures have been delivered to laymen, thousands of leaflets have been distributed, dispensaries and sanatoria have been established, fumigation of houses has been instituted and close personal teaching of the patient through physician and nurse has been carried on.

This work so well begun is only begun. It must be continued with earnestness even greater than that of the past.

OPEN-AIR SCHOOLS—STARTLING FACTS FROM OAKLAND.

BY N. K. FOSTER, M.D.,

Director Department of Health, Development and Sanitation, Oakland Schools.

The prevention of tuberculosis is easily one of the most important problems before the public today, killing many hundreds of our people each year, and making unproductive thousands of others. It is a drain upon our resources which should enlist the best thought and statesmanship of our State to stop. There are many causes working to lower the vitality and resisting power of the human system, making us an easy victim to the disease. My work in the schools has impressed me very strongly with the idea that they are responsible in no small degree for this lowered vitality. Very few school buildings are properly ventilated.

Those heated with hot air forced in by fans possibly get a large amount

of air, but frequently it passes around the walls in currents and falls to remove the mass of bad air in which the children sit. Besides, this air has but a small amount of moisture in it and literally sucks the moisture from the mucus membranes of the children, leaving them in a condition to easily become diseased.

Those heated with stoves are perhaps better, but still the heat is unequal and the rooms not always ventilated. Why not cut out the heat and teach out doors or in open rooms? Save money in building, heating plants and fuel and build strong, robust children.

The Oakland Board of Education last July built an open-air school of one room. We filled it by picking from the eighth grade school where it was located, 25 of the children who were below par in physical condition. One had a tubercular hip joint, and two or three others probably latent tuberculosis. None were robust. They were all carefully weighed, as were the rest of the pupils in the school. At the end of one term, last Christmas, they were weighed again and a comparison made. Those in the main school building, heated and ventilated as any school building is, gained an average of 2.36 pounds. Those outside in a room with one side out and open spaces on two others gained 3.7 pounds, beating the others 55 per cent.

The only different treatment they received was good air all the time. They were all promoted and made equally good or better progress than those inside. All winter they have stayed there, happy and loyal advocates of fresh air. None of them have suffered from colds, nor have they been cold. And I feel certain that if we can keep them in such surroundings, we have saved several from tuberculosis. It seems to me foolish and unbusinesslike to spend our money in a way that ruins the health

of our children, when it is so easy, pleasant and healthful to teach in open buildings. N. K. FOSTER.

OPEN-AIR SCHOOLS IN THEIR RELATION TO TUBERCULOUS CHILDREN.

BY EDWARD HYATT,
State Superintendent of Public Instruction,
Sacramento, Cal.

The relation of fresh air to health has long been recognized, and it has even begun to be realized that it is as efficacious when applied to well people as a preventive of illness as it is when applied to sick people as a cure. But the crowning achievement of progressive understanding is the dawning realization that fresh air for school children is literally the "breath of life" to them. School folk there are who actually believe that the children should not be limited to fifteen minutes of it, twice a day, with whatever additional they may be able to crowd in at noon and after school; but that, on the contrary, they should have it all day long.

"And interfere with their lessons?" the conservatives cry, in alarm.

"But what," reply the innovators, "what has fresh air to do with hurting scholarship?"

Nothing, of course. As a matter of fact, it is a tremendous aid to scholarship, but that is not especially the point of this article. The point here to be made is, that the health of the children, especially in the prevention and cure of tuberculosis, is to be more safeguarded by this means, in the future, than by any other single agency. And surely, of all places in the world that should lead in this movement, California—the home of the flowers, the land of year-round life in the open—California should point the way for all.

England and Germany were the pioneers in the experiments with

open-air schools. The first school of the sort started in Germany was founded at Charlottenberg about ten years ago. Today it is pronounced a success and is attended by 250 pupils. The first scientific tabulations of the results obtained at this school were made in 1905, and covered observations of 100 pupils for a period of three months. The results were the complete cure of 23 per cent. of the children and the radical improvement of 45 per cent. of them—all sufferers from tuberculosis. A later experiment, with five months of observation, showed even better results: nearly one-half of the anemic cases, and about one-third of the scrofulous cases were cured. This school is now maintained from April to Christmas of every year. The pupils come at 8:30 in the morning, stay till 7:30 in the evening, and live and study literally under the open sky. The scholarship of all the pupils has improved and their behavior has done the same.

The experiment has since been tried in several American cities, and with uniformly satisfactory results. The first school of the kind in this country was opened at Parker Hill, Boston, in July, 1907. A selection was made from the children of 1250 families known to be victims of tuberculosis. The school undertook to give these children plenty of fresh air, plenty of the best food especially adapted to their condition, and a thoroughly hygienic regimen of life. At the end of fifteen weeks, nine of the thirty-two who had been admitted during that period were sent back to their regular schools as "arrested" cases.

Similar results have been achieved in New York City, in Washington, D. C., and in Providence, R. I. The idea is taking hold in many parts of

the country, notably, in California, in the case of Alameda, where the proposal to build the new Haight School on a plan especially designed for this purpose has been under consideration.

Back of the success of these experiments lies, of course, the modern theory of the fresh-air cure of tuberculosis. But with that, and of particular interest to educational workers, is the new realization that all mental processes go directly back to a physical basis, and that a good half of the problem of teaching is to first have the pupils in good health, so that their minds may be in fit condition to receive instruction.

The method in all these schools is essentially the same. It consists, first, in either literal or practical outdoors as the schoolroom with, of course, provision for shelter in case of storm and for ample protection against cold in the winter. The feeding is the item of next importance. Especially nutritious foods are provided, and in some cases are served four or five times a day. Care is taken that the intervals of rest and recreation shall be frequent, and that no subject shall be pursued far enough at one session to become wearisome or lacking in interest to the children. In some of the schools the lessons are taught almost entirely by the method of actual investigation, by the pupils, of the natural wonders of the school yard. Even the sums in arithmetic are made vivid and real by requiring, for instance, that measurements be made of objects in the yard and the numbers so obtained be used as the factors in the problems to be solved.

By these means the minds and bodies and spirits of the children are all stimulated to expand and grow. Cheerfulness is a natural result of such a natural way of living, and

cheerfulness is the first step toward the habit of health and the habit of study as well.

But the point of this article, its significance to Californians, lies in these facts, just announced by the National Association for the Study and Prevention of Tuberculosis: That sixty-five open-air schools for the treatment of children afflicted with tuberculosis have been established in twenty-eight cities since January 1, 1909, and that of these, eight schools, in six cities, have been opened since the first of this year. How many of these were founded in California? That is the point. For here is an opportunity for California to lead the world. With her gracious climate and with a public proud of her schools and eager to improve them, surely here is the place, of all places, where this State may develop an original genius that shall not only be a practical and beautiful equipment for her educational system but a beneficence to the world.

FRESH AIR IDEA IS COMMENDED.

Judge Hutton Makes Forceful Plea
for Ventilation.

Cites the Experience of Circus People
with Animals as an Illustration of
the Value of Pure Breathing Fund—
Urges Board to Build New Build-
ings Thus.

SANTA MONICA, March 9.—In planning for the erection of a \$200,000 Polytechnic High School building here during the coming summer, the members of the Board of Education are giving consideration to the matter of embodying the open-air idea in the structures to be reared on Prospect Hill. At the meeting of the board last night Superior Judge Hutton advocated the incorporation of

the ozone idea. In a paper read before the board he said:

It has long been a well-known fact that the greatest enemy of monkeys in captivity and children in school, is the great white plague, either in the form of consumption or pneumonia.

Some years ago there were seventeen deaths among the monkeys at Lincoln Park zoo in Chicago, in the space of ten months, from consumption and pneumonia. This represented about one-third of the total number in the zoo. The orders were given by those in charge that the remainder should have special care and attention. A thermometer hung in front of the cage, and steam pipes surrounded it. The temperature was kept at an even and constant heat of 85, but in spite of all this, others died, of consumption and pneumonia. Then they began to experiment. The monkeys were dying anyway. And so they just cut a hole through the wall, built a cage outside, and let the monkeys go out and in as they liked. The monkeys were very grateful for the change, and no matter what the weather was, they were out several times a day. The colds and coughs ceased, and the great white plague ceased, so far as Lincoln Park zoo was concerned. The Sells-Floto circus applies the open-air cure to its monkeys, with similar success.

The knowledge thus acquired by experimenting with the monkey in captivity has been applied to children in school, and modern science has learned that artificial heat destroys the oxygen in the atmosphere. Out-of-door schools have been tried, and there is only one report—the children have been immensely benefited in mind and body. Pale cheeks have become rosy; watery eyes have become bright; listless minds have become alert; tired bodies have become re-

sponsive. Our steam-heated school rooms, where children are bunched like monkeys in a cage, are culture-beds of bacteria. Disease and death in such places take heavy toll. Education at the expense of health is a poor bargain. Science and common-sense should come to the rescue and give us outdoor schools.

The subject of outdoor schools is one to which I have given considerable thought and inquiry. I have read with care magazine articles, newspaper reports and editorials dealing with the subject, both theoretically, practically, as worked out in Chicago and Oakland, and now being attempted on a small scale in Los Angeles, and on a large scale in Monrovia.

I have talked to well-known architects, and have made an absolute demonstration of the utility of such an outdoor living room, by building one as a part of my home, right here in Santa Monica. This has been in use for years, and is not only the most used, as well as the most useful room in the house, but members of my family will not use any other room in the day time, except in the most stormy weather. Several members of the school faculty and of your board already know this room and its advantages and comforts, and you are all most cordially invited to inspect it.

Basing my opinion upon the investigation and recommendation above stated, I unhesitatingly and most urgently recommend that your board adopt the open-air plan in the new Polytechnic High School, and apply it as far as practicable to the schools now in use, by building at least one open-air room, as an annex to all present school buildings, and in the new High School apply the plan as completely as experience has shown to be practicable in Chicago, where the sub-

ject has received more attention than in any other city.

I most sincerely urge that you bear in mind that this is no fad—merely a revival of the patio, or open-air living rooms of early California, and as applied to our schools, a vital thing, going to the very life of the rising generation.

The child mind is hungry for knowledge, and does not resent the learning, but does very justly resent being shut up in any building in this land of sunshine. We should treat our children as wisely and as well as we do monkeys. Let the twentieth century rescue them from the nineteenth century ignorance and prejudice.

We should be among the foremost leaders in this work. I venture the assertion that people will come here from all parts of the country to take advantage of the outdoor educational facilities offered. If you want a city of 50,000 people, I know of no surer way to get it than by offering the inducement of common-sense, twentieth-century open-air schools.—Los Angeles Times, March 10, 1911.

CHILDREN OF TUBERCULAR PARENTS.

BY JOHN C. KING, BANNING, CAL.
President Medical Society of the State of California.

These children do not inherit tuberculosis. They are almost never born with the disease. They do inherit a predisposition to the disease. That is, any child born of any parent suffering from any grave constitutional disease is born handicapped by inability to resist any infection, in the sense that more fortunately born children are able to resist. This defective resistance to disease may continue through life, or for many years, or may be overcome by careful hygiene and physical training. The danger to such children lies in

the exposure to infectious germs, notably to the bacillus of tuberculosis. If either or both parents have tuberculosis, and the child is in daily contact with such parent, then more than ordinary precaution must be taken to protect the child. Should the child be separated from the infected parent? In some cases, yes, but not as a rule. Granting proper care, the child will probably escape infection—only, the care must exceed that necessary to protect adults in the same family. Children and very young people require parental care, love and advice. There is no substitute for it. I have repeatedly noted the effect upon the after life, of even young children, of the affection and moral training given by a dying mother during the last few months of her life. These memories are often invaluable to the child, become its choicest possession; then, too, the older child should be taught devotion to others, especially to parents; should not be trained to cowardly desertion of a loved one in need.

The infected mother should never nurse the new-born child. Her milk may or may not contain the germ of tuberculosis, but the risk to the baby is great and to the mother greater. A wet nurse should be secured or, if that is impossible, certified milk used. Artificial foods stand only third in order of usefulness and safety. As the child grows, especial care should be devoted to its digestion. Its food should be plain but nutritious and should usually contain a larger percentage of fat than is needful for other children. For many years it must depend upon its digestive organs to overcome its hereditary tendencies. It can never safely indulge in the abuse of the stomach so dear to childhood. The clothing of baby, child and young adults should be light, loose and warm. Silk underwear is best, next to it comes light

wool gauze. Avoid tight clothing (corsets on growing girls). "Colds," to which such children are prone, are not caused by exposure to cold, pure air, but arise from too warm clothes; from overheating of rooms and from bad air. Tasteful garments are correct but needless decoration is a snare. The child requires good climate and that can only be found out-doors, never in the house. Let the baby sleep on the porch in its buggy or, at night, in a wide-open room. The child should pass its nights on a screen porch or in the yard. Never allow the young one, or old one either, to sleep with the infected parent. Out-door play; out-door work; out-door sleep; out-door life. For some years following babyhood the little one becomes an inhabitant of the floor. Keep the floor clean. The parent who spits on the floor should be permanently chloroformed. Remember that, at this age, everything the child handles goes to its mouth. Keep its playthings unpolluted; let the sick mother handle them only with washed hands. She should not give her own things to the child to play with. If the parent must kiss the kid, kiss it on its back, never on its face. Never let the child feed from the sick parent's plate. "Mama a bite and baby a bite" from the same piece, may sometime send baby to heaven. No consumptive should ever use a handkerchief—but only gauze or cheese cloth, that can be immediately burned. Every one has seen a tubercular parent wipe the child's nose, or mouth or face with the family handkerchief. Maybe, has even seen one of them use spittle on the rag to remove good, clean dirt from baby's face. Bah! Teach the child to use its own toilet articles, comb, brush, towel, wash-rag, handkerchief, etc. Also, its own eating utensils, napkin, spoon, cup, plate. These children are apt to be mentally pre-

cocious; keep them out of school until seven or eight years old. Do not allow them to be over-taxed, mentally or physically. A year or two of rest will never be missed. An education is not especially useful to a dead kid. Too many of them break down at the end of a brilliant high-school career. The proper care of nose and throat is particularly essential. Catarrh should be promptly treated. Adenoids and enlarged tonsils should be removed. These conditions do not produce consumption but they do not render their owner very susceptible to the tubercle bacillus. Teach the child to keep its genital organs clean and decent. Please remember the floor, and then think of it again. You see, baby does not ingest tubercular germs and die the next day. The bacilli may remain latent, dormant, yet virulent, and only begin to give real trouble after months, perhaps years. One might write a book on this subject (there are several of them) without exhausting it. My object is merely to attract attention to a few salient points for the purpose of emphasizing the importance of studying the hundred-and-one things necessary to protect the child of tubercular parents from the disease the parents themselves have acquired from some one else, and which they may not wish to pass along to their little ones.

PARTIAL LIST OF PUBLIC HEALTH ORGANIZATIONS OF CALIFORNIA.

(A). California Public Health League.

President, Mr. A. Bonnheim, Sacramento.

Secretary, Dr. William F. Snow, Sacramento.

Note.—The League is made up of the Associations indicated by a (*) in the list given below. The purpose of the League is to serve as a clear-

ing-house for all the common interests of the societies composing its membership. All correspondence should be addressed to the Secretary, Sacramento, California.

(B). Organizations Which Are Active Along Special Lines of Health Conservation.

I. Associations for the Prevention of Tuberculosis.

1. *California State Association for the Study and Prevention of Tuberculosis. President, Dr. George H. Kress, Los Angeles; Secretary, Dr. George Tucker, Riverside, Cal.

2. Affiliated Branch Societies: Alameda County, Long Beach, Los Angeles, Monrovia, Pasadena, Redlands, Sacramento, San Diego, San Francisco, Santa Ana, Santa Barbara, Sierra Madre, Stockton.

II. Associations for the Prevention of Syphilis and Gonococcus Infections.

1. *California State Association for the Study and Prevention of Syphilis and Gonococcus Infections. President, Dr. John C. Spencer, Butler Building, San Francisco; Secretary, Dr. R. A. Archibald, Department of Health, Oakland.

III. Associations for the Improvement of Milk Supplies.

1. *California State Association of Medical Milk Commissions. Dr. Lewis Sayre Mace, Chairman Executive Committee.

2. Affiliated Branch Commissions: San Francisco, Los Angeles, Oakland, San Jose, Sacramento, Santa Barbara.

3. San Francisco Milk Improvement Association.

IV. Associations for the Improvement of Child Hygiene.

1. *California Playground Association. President, O. K. Cushing, First

National Bank Building San Francisco; Secretary, C. E. Hudspeth, 751 Fifty-ninth Street, Oakland.

2. Local Associations Los Angeles, Oakland, Sacramento, Fresno, San Jose

V. Miscellaneous Associations Carrying on Important Public Health Work.

1. "American Red Cross. There are chapters in San Francisco, Berkeley, Los Angeles, Stockton, Sacramento and Napa.

2. "California League of Municipalities

3. "California Federation of Women's Clubs.

4. California Congress of Mothers.

5. "California Teachers' Association

6. "California Press Association.

7. State Charities Aid Association.

8. Anti-Mosquito Associations.

9. Association of Collegiate Alumni

10. Civic Department, California Club, San Francisco.

11. "The Public Health Education Committee of the A. M. A., Eleanor Seymour, M.D., Los Angeles, State Secretary

12. California Anti-Saloon League Northern Division, Rev. A. C. Bane, San Francisco, President, Southern Division, Rev. E. S. Chapman, Los Angeles, President.

Names of officers and information concerning these associations will be sent on application to the State Associations listed, or to the Secretary of the State Board of Health.

MEMBERS CALIFORNIA STATE BOARD OF HEALTH.

Write to the Secretary for the monthly Bulletin.

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Sacramento

M. E. Jaffa, M.S., Director, Food and Drug Laboratory
University of California, Berkeley

A. R. Ward, D.V.M., Director, Hygienic Laboratory
University of California, Berkeley

The California State Board of Health meets regularly the first Saturday of each month, but the stated meetings of January, April, July, and October constitute the quarterly meetings required by law to be held at the Capitol of the State.

By courtesy of the University of California the Food and Drug Laboratory and the Hygienic Laboratory are located in University buildings at Berkeley, California.

Address all communications to the SECRETARY Cal. State Board of Health, Sacramento, Cal.

"Whoever was the father of the disease, an ill diet was the mother."

"Even the lion must defend itself against the flies."

SEVENTH INTERNATIONAL CONGRESS AGAINST TUBERCULOSIS.

To Be Held in Rome from the 24th to the 30th of September, 1911, Under the Distinguished Patronage of T. M. the King and Queen of Italy.

The last International Congress against Tuberculosis, held at Washington in 1908, chose Rome as the meeting place of the Seventh Congress.

To justify the high honor conferred on Italy and on Rome by this choice, the General Organizing Committee, of which the government nominated Prof. Guido Baccelli president, had laid upon it the arduous task of rallying round it for the prophylaxis of tuberculosis and the battle against it, men of science, philanthropists, including those of the gentler sex, statesmen, all in short who have at heart an ever more vigilant defense of mankind against this terrible scourge.

To this Congress of ours, then, we invite all who wish well to their fellow-men, and who realize the enormous gain to the resources of the race from a united and harmonious advance along the path of sanitary science.

The work of the Congress will be distributed among three great sections, in order to give scope to the discussion of every possible mode of operation, whether in the individual battle against the disease in its diagnosis and its treatment, or in the combinations against it for the defense of the race against its terrors and its fatal consequences. The three sections are the following:

- (a) Etiology and Epidemiology of Tuberculosis.
- (b) Pathology and Therapeutics (Medical and Surgical) of Tuberculosis.
- (c) Social Defence Against Tuberculosis.

The Congress will be held at Rome from the 23rd to the 30th of September; and a Special Committee is making preparations for an exhibition of Social Hygiene (to be held at the same time with the Congress), which will be the best possible illustration of its work.

(Signed) GUIDO BACCELLI,
President.

VITTORIO ASCOLI,
Secretary General.

Those who intend to take part in the Congress should apply to the Secretary-General,

• 36, Via in Lucina
ROME.

Members' tickets, 25 francs.

Members' relatives can obtain tickets at 10 francs.

Payment to be made, by postal order, on application to the Secretary.

The above tickets give their holders the right to reduced railway fares, admission to various social gatherings, etc., etc.

INFORMATION FOR MEMBERS.

Opening of the Congress.

The Congress will be opened on Sept. 24th, 1911, at 10 a.m., in the large Amphitheatre of the Augusteo, in the presence of T. M. the King and Queen of Italy.

The meetings of the Congress will be held in the Castle of S. Angelo.

Membership.

The Congress is open to medical men of all nations, and to all who are interested in the discussion of combined hygienic effort against tuberculosis. Application to be made to the offices of the Organizing Committee

of the Congress (36 Via in Lucina),—to which the applicant's visiting card should be forwarded, bearing clearly and fully his address (town, street and number)—the fee of 25 Italian lire being sent at the same time to the Treasurer of the Congress (36 Via in Lucina).

No application can be made otherwise than directly to the office of the Secretary-General, accompanied by the above subscription. Relatives of members pay a subscription of 10 lire only (each).

Privileges of Members.

Membership of the Congress carries with it the right to receive, immediately on payment of the entrance fee, the special ticket, which enables the holder to travel at specially reduced fares on the Italian railways, both from inland frontier stations, such as Ventimiglia, Bardonecchia, Perù, Domodossola and Pontebba, and from ports, such as Genoa, Naples, Venice and Brindisi.

The fare for tickets from these stations to Rome will in due time be communicated to members.

Members are entitled to be present at the meetings of the Congress and to receive a copy of its official publications; they have also the privilege (ladies included) to take part in receptions and other social gatherings, to visit gratis the ruins of antiquity, to make excursions under exceptionally favorable conditions in the neighborhood of Rome, and to travel in Italy at specially reduced fares, particulars of which will be found in the prospectuses which will be forwarded to them.

Meeting of the Congress.

The Congress will be held in the month of September, 1911, from the 24th to the 30th.

Members, immediately on arrival in Rome, should make their way to the offices of the Organizing Committee (36 Via in Lucina), to receive the card of admission to the Congress, the distinctive badges of membership, the tickets for the meetings and social gatherings, and all the information that the committee may think it advisable to give them.

President,
PROF. GUIDO BACCELLI.

Secretary-General,
Prof. VITTORIO ASCOLI.
Secretary's Office,

Via in Lucina, N. 36, Rome, Italy.

N.B.—All who receive this paper are earnestly begged to make its contents known as widely as possible.

LIST OF SECTIONS.

1. Etiology and Epidemiology of Tuberculosis.
2. Pathology and Therapeutics (Medical and Surgical) of Tuberculosis.
3. Social Defence Against Tuberculosis.

I hereby state that I wish to take part in the International Congress against Tuberculosis, and to have my name entered for sections..... (1, 2, 3), (Those selected to be underlined); and I enclose for this purpose the fee of 25 francs.

(Signature)

Surname
Christian Name.....
Profession.....
Place of Abode.....
Full Address.....
(Date) 1911.

N.B.—Payment to be made by International Postal Order, payable to the Treasurer of the Congress and addressed to the Secretary's Office.

"Hang a thief when he's young, and he'll not steal when he's old."

HOW THE BOARD OF SUPERVISORS OF ANY COUNTY IN CALIFORNIA MAY CARE FOR ITS CONSUMPTIVES.

Excerpts from Chapter 591—An act to provide for the medical treatment of indigent residents afflicted with incipient pulmonary tuberculosis; and to prescribe the duties of the State Board of Health and other public officials with relation thereto.

[Approved April 14, 1909.]

The people of the State of California, represented in Senate and Assembly, do enact as follows:

Section 1. Until such time as there shall be established by law in this state a state hospital for the medical treatment of persons afflicted with incipient pulmonary tuberculosis, the State Board of Health is hereby authorized and empowered to enter into appropriate contracts with the board of managers, or other executive head, of any institution which is now or may hereafter be established and maintained in this State for the express purpose of affording approved medical treatment to patients having incipient pulmonary tuberculosis, wherein there shall be made provision for the treatment at public expense of indigent residents of this State afflicted with such disease. In making such contracts, the board shall be guided by general considerations of public health and safety, together with the approved teachings of medical science, touching upon the location, altitude and climatic conditions of the institutions offering to enter into such contracts. The board of managers, or other executive head, of each institution desiring to enter into such contracts and receive and treat patients, under the provisions of this act, must, in writing, apply to the secretary of the State Board of Health for an inspection and examination of such institution, and must give all such information concerning the location, climatic surroundings, methods of treatment or other details of man-

agement, as the board may require. Such information shall be given upon forms prepared for the purpose by the Board of Health, and shall be signed by the medical superintendent of such institution. In the event such institution, its management and methods of treatment be approved by the Board of Health, the board of managers, or other executive head thereof, shall, within ten days after receipt of notice of such approval, forward to the secretary of the board, a written offer in behalf of such institution to receive, medically treat, and otherwise care for, such patients as might be sent there under the provisions of this act, not exceeding a stated number in all, at a uniform charge, which shall in no case exceed one dollar per day for each of such patients; further agreeing in behalf of said institution to furnish to the secretary of the board, on forms prepared by him, all such reports as the State Board of Health may, from time to time, require, together with full and complete information concerning any new or important discoveries made in the methods of treating, checking, preventing, or curing said disease, and such recommendations regarding the same as may be deemed beneficial to the interests of the public. Upon receipt of such offer, the board may, if it so elects, proceed to enter into a contract with such institution for the maintenance and treatment therein of county patients, the form of which shall be approved by the Attorney-General prior to execution. Every in-

stitution entering into such a contract shall be required to give bonds in the sum of five thousand dollars, conditioned for the faithful performance of the obligations by it assumed in such contract. Upon the execution of the contract and the filing of the bond, the secretary of the State Board of Health shall certify to the clerk of the Board of Supervisors of each county in this State the name and location of such institution and such other details concerning the same as he may deem appropriate.

Sec. 2. Each county of this State is hereby given the privilege of maintaining in said institutions, at the expense of such county, such number of indigent patients as its Board of Supervisors may determine; provided, however, that the total number of such patients shall not exceed the aggregate capacity of the institutions making such contracts; and provided further, that no county shall be required to pay more than one dollar per day per patient for all medical and other services rendered such patient.

Sec. 3. Indigent persons who are afflicted with incipient pulmonary tuberculosis, and who have been residents of this State for not less than one year prior to making application therefor, may be admitted to any such institution selected as in section one hereof provided, and receive treatment therein at the expense of the county in which he or she resides, in the manner and upon the terms and conditions hereinafter prescribed, etc.

**COPY OF TITLE OF MISSOURI
SENATE BILL NO. 472, 46TH
GENERAL ASSEMBLY.**

INTRODUCED BY SENATOR HIMPHEY.

AN ACT

To provide for the creation of public tuberculosis hospital districts; to authorize the appointment of boards

of commissioners of such districts; to prescribe the powers of such boards, authorizing them to appoint and fix the salaries of the officers and employes, empowering them to acquire, improve, maintain, regulate and control public tuberculosis hospitals and dispensaries, to provide for the issue of bonds on the credit of the district and the levy of a tax on said district for the purpose of establishing, improving, controlling and maintaining public tuberculosis hospitals and dispensaries in the State of Missouri.
Section—

1. Tuberculosis hospital districts, how formed.

2. Boards of commissioners, their qualifications, terms, compensation.

3. Officers and employes, compensation and bond.

4. Office—meetings.

5. Purchase of site and erection of improvements, bids.

6. Board of commissioners shall control, what.

7. Compensation to be paid for damage to property.

8. Board may borrow—bonds issued, how—taxes, how levied.

9. Money to be paid to treasurer—depository selected by board.

10. Reports.

11. Donations and bequests.

Be it enacted by the General Assembly of the State of Missouri, as follows:

Section 1. Tuberculosis hospital districts, how formed. Whenever any county, part of any county, two or more counties contiguous with each other, city or cities not within a county, or such city and contiguous county or counties, desire to become incorporated as a tuberculosis hospital district, it may do so in the following manner, to wit: Five per cent. of the legally qualified voters residing within such proposed tuberculosis

hospital district may, in each county, part of a county, and city not within a county, in writing, petition, respectively, the county court of the county or counties and the municipal assembly of the city or cities not within a county, to cause to be submitted to the legal voters of such county, part of a county, counties, city or cities not within a county, the question whether they will organize as a tuberculosis hospital district under this act. Such petition or petitions shall be addressed respectively to the county court of the county or counties and to the municipal assembly of the city or cities not within a county, in which said territory is situated and shall contain a definite and clear description of the boundaries of the territory to be embraced in such district. In computing the five per cent. of the legally qualified voters, only such signatures on said petition or petitions shall be counted as are accompanied by a statement of the place of residence of each petitioner. Upon the filing of such petition or petitions with the clerk or clerks of the county court of the county, the secretary or secretaries of the municipal assembly of the city or cities not within a county,

it shall be the duty of the said court or courts and the municipal assembly of the city or cities not within a county, to order an election to be held, whereat such legally qualified voters as reside within the said proposed district may vote on the question whether the said territory shall incorporate as a tuberculosis hospital district under this act. Said election shall be held in accordance with the election laws of Missouri and at the next regular election occurring not less than sixty (60) days after the filing of the last petition. If the majority of the votes cast on the said proposition in each part of the said district, when the same lies in two or more counties or city and county, or if the majority of the votes in the said district where the same lies wholly within one county or city shall be in favor of the proposed tuberculosis district, such proposed district shall thenceforth be considered an organized tuberculosis hospital district under this act. The vote taken at such election shall be certified to the secretary of state in the same manner as are amendments to the Constitution of the state of Missouri. . . .

OUTLINE OF LECTURE OR SERMON ON TUBERCULOSIS.

PREPARED FOR USE ON TUBERCULOSIS DAY AND OTHER OCCASIONS, BY THE
NATIONAL ASSOCIATION FOR THE STUDY AND PREVENTION OF
TUBERCULOSIS, 105 EAST 22ND STREET, NEW YORK.

TUBERCULOSIS IS A COMMUNICABLE, PREVENTABLE AND CURABLE DISEASE.

I. What Tuberculosis Does.

It kills 200,000 persons each year in the United States—1 every 3 minutes.

It kills one-tenth to one-seventh of all our people.

It kills one-third of all who die between the ages of 18 and 45.

II. What Tuberculosis Is.

Tuberculosis is a disease process caused by the growth in the body of the tubercle bacillus or germ. The germ is a vegetable parasite, rod shaped, approximately 1.10000 of an inch long and 1.100000 of an inch wide, discovered by Robert Koch of Berlin in 1882. The daily expectoration of a consumptive may contain millions of germs.

The germ growing in the body destroys tissues and produces poisons or toxins which cause the well-known symptoms of the disease.

The commonest form of tuberculosis is tuberculosis of the lungs, or consumption, but it may occur in any part of the body and especially in the bones and joints.

III. Predisposing Causes.

In the person—

1. Weakened physical condition.
2. Lack of proper food.
3. Alcoholism.
4. Grippe, colds, pneumonia, measles, typhoid, pleurisy, etc.

In the environment—

Bad living and working conditions—especially impure air, darkness, dirt and dust.

IV. Immediate Causes.

Tuberculosis is acquired, not inherited. There can be no tuberculosis without the germ. The commonest method of infection is by inhalation. Dried germs from sputum of consumptives float in the air and are breathed into the lungs. Hence the necessity of destroying all sputum, and of special precautions in coughing and sneezing. Tuberculosis may also be acquired by ingestion, i. e., by swallowing the germs with infected milk and food and more rarely by inoculation through cuts and wounds.

V. Commonest Early Symptoms.

Persistent cough or cold lasting a month or longer.

Loss of weight and appetite.

Run down feeling.

Afternoon temperature.

Night sweats.

Spitting of blood or streaks of blood in sputum.

These symptoms should lead anyone to consult a physician at once.

VI. Tuberculosis in Children.

Tuberculosis is not inherited. A person may inherit a weak constitution which is especially susceptible to tuberculous infection.

Prevalence in families where parent has consumption is due to direct infection. Danger from playing on infected floors, using infected utensils, clothes, etc.

VI. How Tuberculosis May Be Treated and Cured.

1. Essentials in cure of tuberculosis are fresh air, light, cleanliness, rest and wholesome food.

2. Early discovery of disease is necessary for cure. Best method of cure is sanatorium treatment.

3. Disease may be treated at home, if patient can be given plenty of food and fresh air under direction of a physician. Tuberculosis dispensaries give free advice and treatment to those unable to pay a physician.

4. Avoid patent medicines and advertised cures. They do not cure and are always dangerous.

5. No danger from a careful consumptive who destroys his sputum properly and is cleanly in habits.

VIII. How Tuberculosis May Be Prevented.

1. By teaching the consumptive to destroy his sputum.

2. By teaching people not to sleep, live or work in dark or badly ventilated rooms.

3. By teaching the consumptive how not to infect his family or neighbors.

4. By discovering the disease in its early stages and curing the patient, thus removing a source of infection to others.

5. By educating the community as to the nature of the disease—that it is communicable, preventable and curable.

6. By educating people to keep their bodies in such physical condition as to enable them to resist the germs.

7. By advocating fresh air, outdoor life, sunshine, rest, no overwork, wholesome food, temperate habits.

IX. What Is Being Done To Prevent Tuberculosis.

An organized movement in all parts of the United States which has for its objects—

1. The education of all the people with regard to the facts.

2. The establishment on an adequate scale of—

(a) Hospitals for advanced and incurable cases.

(b) Dispensaries for early diagnosis and advice.

(c) Sanatoria for treatment of curable cases.

(d) Open-air schools and provision for children predisposed to tuberculosis.

3. The securing of proper state and municipal legislation.

4. Co-operation with all sound movements for the betterment of living and working conditions.

The growth of the movement may be seen in the fact that there were in the United States on April 1, 1911, over 500 anti-tuberculosis associations and committees, about 450 special tuberculosis hospitals and sanatoria, and over 300 special tuberculosis dispensaries. Before January 1, 1905, there were 24 associations, 115 tuberculosis hospitals and sanatoria and 19 special tuberculosis dispensaries.

X. How You Can Help.

1. **Churches:**—By informing themselves on the actual tuberculosis situation in their respective parishes and cities; by making adequate provision for indigent members; by distributing literature and educating the people

about tuberculosis; and by co-operating definitely with all existing agencies working for the prevention of tuberculosis.

2. **Teachers:**—By instructing pupils as to nature, prevention and cure of tuberculosis; teaching children simple rules of health, how to breathe deeply, etc.; keeping the classroom well ventilated.

3. **Parents:**—By keeping the home clean and well ventilated; teaching children to sleep with windows open, to eat proper and nourishing food, to observe the laws of health.

4. **Children:**—By keeping clean; by not putting anything in your mouths, except food; by staying as much as possible in the fresh air and sunshine; by eating only wholesome and nourishing food.

5. **Workers:**—By insisting on the working place being thoroughly ventilated; by avoiding dust, dampness and darkness; by avoiding overwork; by demand for proper spittoons.

6. **Everyone:**—By taking care of your own health; by stopping indiscriminate spitting; by joining in the movement to stamp out tuberculosis in your community.

Note:—Ascertain tuberculosis mortality for your state or city as well as other facts of local interest from the Health Officer or local Anti-Tuberculosis Association.

Literature.

Further information can be obtained from the following books and pamphlets which are written for popular use and can be recommended as trustworthy.

Tuberculosis as a Disease of the Masses and How to Combat It. By S. Adolphus Knopf, M.D. 104 pp., 5th edition, New York, 1908. Charities Pub. Committee. Paper, 20 cents; cloth, 50 cents postpaid.

Tuberculosis: A Curable and Preventable Disease. By Lawrence F. Flick, M.D. 64 pp., Philadelphia, 1910. John C. Winston Company. 12 cents postpaid.

Handbook for Tuberculosis Committees and Workers. Prepared by the New York State Charities Aid Association from the Proceedings of the Conference of Local Committees. 248 pp., New York, 1910. The Charities Publications Committee. Paper, 50 cents postpaid.

The Crusade Against Tuberculosis: Consumption a Curable and Preventable Disease: What a Layman Should Know About It. By Lawrence F. Flick, M.D. 295 pp., Philadelphia, 1903. D. McKay. \$1.08 postpaid.

The Great White Plague—Tuberculosis. By Edward O. Otis, M.D. 321 pp., New York, 1909. Thomas Y. Crowell & Co. \$1.10 postpaid.

The Conquest of Consumption. By Woods Hutchinson, M.D. 138 pp., New York, 1910. Houghton, Mifflin Co. \$1.08 postpaid.

Tuberculosis: A Preventable and Curable Disease: Modern Methods for the Solution of the Tuberculosis Problem. By S. Adolphus Knopf, M.D. 394 pp., New York, 1909. Second edition, 1910. Moffat, Yard & Co. \$2.20 postpaid.

The Prevention of Tuberculosis. By Arthur Newsholme, M.D., F.R.C.P. 429 pp., London, 1908. \$3.15 postpaid.

The Journal of the Outdoor Life. (The Anti-Tuberculosis Magazine). Issued Monthly. 110 East 23rd Street, New York. Subscription Price, \$1.00 per year.

Note: The Charities Publication Committee, 105 East 22nd Street, New York, will be glad to furnish any of these books postpaid at the prices named.

EXCERPTS FROM THE BULLETIN OF THE COMMITTEE OF ONE HUNDRED ON NATIONAL HEALTH.

ORGAN OF THE AMERICAN HEALTH LEAGUE, PUBLISHED MONTHLY BY THE COMMITTEE OF ONE HUNDRED ON NATIONAL HEALTH,
69 CHURCH STREET, NEW HAVEN.

THE AMERICAN HEALTH LEAGUE.

By a vote of the Executive Committee of the Committee of One Hundred, yearly limits of membership in the American Health League were abolished, and all contributors to the League were made life members. The month of March is the last of the yearly expirations in the League. Those few members who paid their dues more than one year in advance will continue to receive a magazine until the expiration of their present term, when they will become life members.

Instead of receiving dues, the League now receives only direct contributions to its work. All who are

Interested in establishing a National Department of Health should contribute what they can to the work of the American Health League and the Committee of One Hundred. Checks are made payable to the Title Guarantee and Trust Company, Treasurer, 176 Broadway, New York, N. Y.

THE MANN BILL.

The bill introduced by Congressman Mann to change the name of the Public Health and Marine Hospital Service, to increase the pay of officers of said Service and to study and investigate the diseases of man, succeeded in passing the House. The same bill introduced in the Senate by Senator Martin made little progress.

In his speech concerning the bill, Congressman Mann admitted that the measure would block the establishment of a Bureau or Department of Health. Referring to the bill, Ex-President Eliot of Harvard wrote to a Massachusetts Congressman as follows:

"I am sure it is not desirable or wise that the national public health service should be placed in the hands of the Surgeon General and his subordinates. The bill H. R. 30292 (The Mann Bill) gives a very wide scope to the activities of the proposed public health service in lines 12 and 13 of page 1, and 1 to 5 of page 11. Over any Bureau or Department with such functions a civilian scientist ought certainly to preside. Lines 23 to 25 on page 11 would give the Surgeon General control over the entire national health service, if Congress should make the necessary appropriation; but all the medical officers employed under that clause would be subordinates of the Surgeon General. We have never had a Surgeon General who was fit to exercise such a comprehensive control, and it is in the highest degree improbable that we ever shall have, since the training and functions of a Surgeon General do not prepare him for that kind of scientific work.

"The bill makes an unwise proposal in an insidious way. It ought not to get any standing at all before Congress."

Speaking of the opponents of the Health Department, President Eliot says in the same letter:

"They also, as a rule, oppose medical research, vaccination and the use of antitoxines of all sorts. They are opposed to the use of the collective forces of the community to protect people from the results of ignorance, superstition and deceit. Unfortu-

nately, diseases, like ignorance and superstition, cannot be successfully resisted on the principle of respecting each individual's right to suffer, be sick and die. Possibly there is such a right, but it cannot be exercised without grave danger to many other individuals. Contagious diseases take effect on masses of people, and they can only be successfully resisted by collective action."

In the Senate of the United States, February 2, 1911. Referred to the Committee on Public Health and National Quarantine.

AMENDMENT.*

Prepared by Mr. Owen to his bill (S. 6049) establishing a Department of Public Health, and for other purposes, viz.: strike out Section 8 and insert the following:

"Nothing contained in this bill shall be construed in any manner to authorize the Department of Health to exercise any of the functions exclusively belonging to any of the several States with regard to the health service, unless expressly invited by the proper authorities of such State. No officer of the Department of Health shall be authorized by this Act to enter the residence or abode of any person unless invited so to do by the inmates thereof.

"In making examinations for positions in the service of the Department of Health no discrimination whatever shall be made against any applicant on account of any system or school of medicine, but all applications shall be treated alike without regard to the system or school of medicine to which such applicant may have attached himself."

*See Journal A. M. A. of April 22, 1911, Miscellany Department, page 1208, for full text of Senator Owen's bill S. 6049 before the present 62nd Congress. Write to your Senators and Congressmen to support it.

SENATOR OWEN'S STATEMENT.

Senate Bill 6049, to establish a Department of Health, merely brings into co-ordination the various health activities of the Federal Government, putting them under a responsible head whose dignity justifies his being a Cabinet Officer.

If it were impossible to have a Cabinet Officer, a Director General, independent of other supervision than that of the President, would suffice until this matter were more thoroughly appreciated.

I recently introduced an amendment doing away with Section 8, providing for the establishment of chemical and biological standards—since this was a stumbling block to some—and inserted in lieu of it provisions: first, that no employee of the Department should be discriminated against, in examination for qualification, on the ground of his being attached to any school or system of medicine; second, that no officer of this Department should perform any duty properly belonging to the several States under the constitutional law; and third, that no officer of this Department should enter any home without the invitation of the inmates thereof.

This removes every point of objection that has been raised against the bill, and leaves it entirely free from blame even by its most hypercritical adversaries.

ROBT. L. OWEN.

Write Your Congressmen To Vote
for the Owen Bill To Establish a
National Department of Health.

CONSERVATION FOR POSTERITY.

In a recent address before the American Academy of Political and Social Science, Professor Irving Fisher spoke on the Conservation of Human Life. He said in part:

"As I understand it, the idea of conservation has its center of gravity in our love for posterity. Conservation means the extension in time of the horizon of civilized man.

"Civilized man prides himself on his foresight as compared with the savage. The story is told that when missionaries first went to South America and instructed the natives in the use of oxen, these natives had to be treated as children, and the very elementary precepts of keeping oxen alive, of keeping seed corn for the next harvest, had to be impressed upon them from day to day. It was not uncommon at first that after the oxen were used in the field, they would be cut up for the evening meal, and a sufficient excuse to the native mind was that he was hungry.

"But even civilized man needs more foresight. From the standpoint of a nation, we are doing precisely what these South American Indians did. We are cutting up our oxen of today, and eating up our seed corn without much regard for future generations.

"Those nations which have attempted to flourish by exploiting the present, as Rome attempted to exploit those about her, have always committed, in the end, industrial, political and national suicide. It is hard for us in America, enjoying the present plenty, to realize that we are scattering the substance that belongs to future generations."

Professor Fisher then spoke of race suicide and racial degeneration. He quoted Sir Francis Galton as saying that in order to cope with these dangers, we must get into the public conscience a regard for posterity, a regard for the vital rights of posterity, and give to our children and our children's children their birthright in healthy lives.

"The health movement aims to spread the idea of improving the vitality of the present generation," says Prof. Fisher, "by which I mean increasing the length of life, decreasing the burden of illness, and increasing the power to work.

"In regard to the movement for a National Department of Health, this is not the first time that the country has awakened to this thing. Today the sentiment is widespread. Some years ago a somewhat similar movement was started, and it was balked by the passage of a law changing the name of one of the bureaus at Washington from the Marine Hospital Service to the Public Health and Marine Hospital Service. That put off any real public health legislation for a number of years. It is now recognized that valuable public health work is being done by half a dozen different bureaus at Washington. The aim of the President and those interested in this movement has been to bring these various bureaus under some method of actual co-operation, or transfer them into a real Health Bureau. The mountain has labored for a long time, and at length it has brought forth a mouse—it has again proposed a change of name for the Public Health and Marine Hospital Service to the Public Health Service.

"This reminds me of the exercise of a school teacher in definition. She called up Johnny and said, 'How many legs has a cow?' 'Four,' said Johnny. 'But if you call the tail a leg, how many?' 'Five,' said Johnny. 'No,' said the school teacher. 'You might call the tail a leg but it is not a leg.' Now we want a leg that is not so limp; we want a leg that we can stand on in this public health movement, and we want a real Department of Health. If we can't get it from this

Congress, it will be up to the Democrats in the next Congress. The real fault here lies with the people and not with Congress. I hope you will write letters and telegrams and have personal interviews with Congressmen, and then we shall get a Department of Health."

Associations for the prevention of tuberculosis have been formed in Cuba, Porto Rico and Trinidad. In Cuba there are over 40,000 deaths from tuberculosis every year, and the death rate from this disease is nearly three times as high as in the United States. In Porto Rico there are over 6,000 deaths every year out of 1,000,000 inhabitants. In Trinidad, the death rate from tuberculosis in Port-of-Spain, the only place where figures are available, was 4.75 per 1000 in 1909, nearly three times the rate in New York City. Conditions in the other islands of the West Indies, where no active campaign against tuberculosis has been undertaken, are even worse. The chief reason for this high mortality is found in the unsanitary, dark, and poorly ventilated houses of the natives of the islands.

In Denmark the campaign against tuberculosis has been carried on systematically since 1895. The reporting of living cases of tuberculosis in Denmark has been more successful than in almost any other country of the world. The death rate from pulmonary tuberculosis has fallen from 19.32 to 13.33 per 10,000 from 1895 to 1908. There is now one sanatorium for every 1244 inhabitants and every tuberculosis patient is assured of treatment at a cost within reach of anyone. The state pays three-fourths of the expense of treatment and the patient or his community the remaining fourth.

The Tuberculosis [Consumption] Problem*

What Mothers Should Know About It.

Tuberculosis a Disease Responsible for Untold Sorrow to Mothers

Tuberculosis or consumption is a disease which robs the mothers of the world of one out of every ten children.

The causes of this disease are known, likewise the means whereby it may be prevented.

Every mother owes it to herself and her family to know about tuberculosis, so that the lives of her children may not be placed in peril.

The Frequency of Tuberculosis

In the United States more than 150,000 persons die every year from tuberculosis. The great majority of these persons are in the prime of life. Many of these persons are married and their untimely deaths mean dependent families to be cared for by the State.

The loss in money to the United States from these preventable deaths every year amounts to more than three hundred million dollars. The suffering caused by the disease it is impossible to estimate.

Two Important Facts about Tuberculosis

Tuberculosis is **preventable**.

Tuberculosis is **curable**.

These are most important facts worthy of widest circulation, especially since contrary ideas prevail.

Universal prevention and cure of this disease will result only when there is universal effort against it.

In this work of prevention and cure, the mothers of the world can wield a tremendous influence.

The world counts on the aid of the mothers, for what mother would con-

demn either her own or any other child to an unnecessary death?

What are the Causes of Tuberculosis?

First, there is an exciting cause, which is a very small plant called a germ. There can be no tuberculosis unless this germ be present in the body.

Second, the person who takes this disease has a body that is favorable to it. Any person whose health and strength is run down is predisposed to tuberculosis, because in such a person there is not much resistance.

The two things necessary then for tuberculosis are, the presence of a certain germ, and the body of a person whose health for any reason has been run down.

What the Germ Does to the Lungs

When the germ gets into the body of a person who is run down in health, it finds a soil suitable for its growth and produces the disease called tuberculosis.

The germs produce little granules called tubercles, which may later become little ulcers or abscesses.

Poisons are also thrown out by the germs and get into the blood and these poisons cause most of the symptoms of the disease.

What Are the Symptoms of Tuberculosis?

The symptoms are different according to the stage.

It is the symptoms of the early stages that should be learned, for it is then that cure can be brought about and lives saved. What are these symptoms?

This disease usually comes on in very slow and mild fashion. That is what throws the persons infected off

*This is Educational Leaflet number 1 (For Mothers) issued by the California Association for the Study and Prevention of Tuberculosis. Single copies, one cent each. Larger lots, prices on application. Office of the Association, 240 Bradbury Bldg., Los Angeles, Cal.

This leaflet received the gold medal in the competitive leaflet exhibit at the International Congress of Tuberculosis, Washington, D. C., September 21st to October 12th, 1908.

their guard. There may be nothing more than a **tired feeling**, especially after work, a **lessened appetite**, some **loss of weight** and perhaps an occasional cough.

As the disease grows worse, these symptoms do likewise. The **loss of weight** may be very noticeable, there may be **fever** and **night sweats**. With the more frequent cough much **sputum** may be expectorated.

In the far advanced stages some of these symptoms like cough, loss of weight and fever, may be very pronounced. Then we have the picture of the "consumptive."

How May Tuberculosis be Prevented?

Tuberculosis is prevented by doing two things:

1. Killing the germs that cause the disease.
2. Having people become healthy, so that they will not be predisposed to the disease.

How are the Germs to be Destroyed?

The germs are scattered far and wide in the sputum which is coughed up by consumptives. One consumptive can cough up in a single day several billion of these germs.

When this sputum dries as dust, the germs are blown about in all directions to get into the air we breathe and on the food and things we eat and handle. In this way every person at some time in life probably gets the germs into his body.

To destroy these germs, all that is necessary is to destroy the sputum.

If sputum be coughed into paper cups or napkins, these can be burned and the germs destroyed. For spittoons, disinfectant solutions like lye should be used.

Coughing in people's faces or spitting on the streets and especially on floors is dangerous.

How May the Predisposition of a

Weakened Body be Overcome?

Bodily weakness, that is, the predisposition to tuberculosis, may be over-

come by right living, particularly by breathing pure air, eating nourishing food and getting the proper proportion of rest and exercise.

A child weak at birth should be guarded and as it grows older made to spend much time out of doors.

Children weak from diseases like measles or whooping cough should not be neglected. These and kindred diseases are often responsible for tuberculosis being set up later on in life.

Children should not be made to work at too early an age, nor allowed to study so hard as to interfere with health.

The food should be eaten slowly, and should always be nourishing. If cow's milk is used, it should be obtained, if possible, from a dairy having no tuberculous cattle.

The living and sleeping rooms of the family should always be well ventilated. The human body, if it is to be in a healthy state, must have pure air. Bed-rooms should not be overcrowded and single beds are advisable.

The above rules can be taken to heart by grown-up persons as well.

These simple rules are worth observing because a healthy body is usually able to overcome tuberculosis, but a weakened body is not.

How May Tuberculosis be Cured?

Tuberculosis may be cured by the same measures which prevent it, namely, by making the body stronger, so that it will be able to kill the germs that have gotten into the tissues.

The pure air, good food, lots of rest treatment cures more people of tuberculosis than all the medicines that are known.

Avoid patent medicines for tuberculosis, particularly cough medicines, as these usually contain alcohol and opiates, which though they make the patient feel better, usually allow the disease to grow worse.

The above methods should be carried out under the advice of a private or dispensary physician who has made a study of the disease.

Written by George H. Kress, M.D.,
Los Angeles, Cal.

"The Modern Crusade against tuberculosis brings hope and bright prospects of recovery to hundreds and thousands of victims of the disease who under old teachings were abandoned to despair."—*Theodore Roosevelt.*

Leaflet Number 2. (For Teachers.)

California Association for the Study and Prevention of Tuberculosis.

The Tuberculosis [Consumption] Problem.*

WHAT TEACHERS SHOULD KNOW ABOUT IT

Why a World-Warfare is Being Waged

Against Tuberculosis.

Pulmonary tuberculosis, known also by the names of consumption and the great white plague, is responsible for one out of every five to ten deaths.

It has been estimated that the world annually offers up more than one million lives to this disease, two deaths occurring every minute.

In the United States, the death roll from tuberculosis every year means the loss of more than 150,000 citizens.

Most of these deaths (about 90 per cent) are adults. The economic loss represented by these deaths means an annual deficit to this country of more than three hundred million dollars. In addition to this vast loss of money to the nation, there is the suffering endured by the victims of the disease and the sorrow of bereaved and often of dependent families.

All this vast amount of death, treasure, suffering and sorrow is occasioned by a disease that can be prevented. The deaths of these citizens and all the loss that goes therewith are therefore altogether and entirely unnecessary!

Is it any wonder, then, that the civilized world has at last awakened to its responsibilities in this almost greatest of all public health problems and is determined to exterminate this widespread and unnecessary disease?

The basic facts essential to prevention and cure have been discovered. The task before the world is the application of this knowledge. The call to arms for battle with this great scourge has gone forth to all civilized nations and peoples.

The members of the teaching profession will have an almost sacred part to bear in that warfare.

The Important Role of Teachers in the Warfare Against Tuberculosis.

Teachers will have a tremendous influence in the fight against tuberculosis,

because the successful eradication of the disease will depend in good part upon the extent to which the rising generation of citizens are taught concerning its prevention and cure.

What is Tuberculosis?

Tuberculosis is a disease usually affecting the lungs (although bones, glands and other tissues are not infrequently attacked), and which runs most often a slow course of weeks, months or years, being characterized by cough and other pulmonary symptoms with gradual loss of weight and strength and the presence of certain constitutional symptoms.

The Causes of Tuberculosis.

In 1882, Robert Koch of Germany proved that tuberculosis belonged to the class of germ or infectious diseases by discovering the particular or specific germ that must always be present in the body afflicted with this disease. This germ because of its rod-shape is called the bacillus tuberculosis.

Since then has been proven also that the predisposition to the disease exists in those persons whose health for any reason is below normal. In other words, the old idea that tuberculosis was hereditary has been shown to be an error. The most that can be inherited is the predisposition, namely, a weakened body, and a weakened body is far more often acquired than inherited.

The Specific or Germ Cause of Tuberculosis.

The specific or exciting cause of the disease is the micro-organism or germ or bacterium known by the name of the bacillus of tuberculosis. This bacillus is so small that ten thousand placed end to end make only a single linear inch.

Like other bacteria it is a member of the plant kingdom. This particular germ belongs to the class of parasitic plants. In common with other plants it grows best in soils adapted to its needs. The

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soil it seems to prefer above all others is the lung tissue of a person whose health or resistance is below par.

The bacillus of tuberculosis is spread broadcast because a single consumptive can cough up in twenty-four hours sputum containing not millions but actually several billions of germs. Under present conditions the care of this sputum is often neglected and as it dries into dust, the germs are blown hither and thither to contaminate not only the air that is breathed but to get on things that are handled or eaten.

Types of this germ are also found among certain of the lower animals, where they also produce forms of pulmonary tuberculosis. Those found in dairy cows are particularly a menace, since milk is a good medium of transmission.

Predisposing Cause of Tuberculosis—

A Weakened Body.

Through the discovery of the bacillus of tuberculosis and the elimination of the theory of hereditary transmission must disappear also much of the fatalism with which tuberculosis has been accepted by many persons.

The general groups into which the predisposing causes fall may be said to be bodily weakness or lack of resistance resulting either from hereditary enfeeblement, over-work, under-feeding, previous diseases, vicious habits, over-crowding or general unhygienic mode of living.

Many infants are born weak. Unless such children can be developed physically, they are apt to give but feeble resistance to disease.

Over-work, mental or physical, whether from necessity or from choice, through the bodily fatigue and weakness induced, is responsible for many infections from tuberculosis. Certain occupations also, like those with irritating dusts, frequent temperature variations, confined positions and so on favor the production of bodily or pulmonary weakness.

Under-feeding, whether from insufficient or improper foods, is another factor responsible for much bodily weakness.

Previous diseases—and particularly in childhood, measles and whooping-cough, and later in life, grippé—often induce a lack of resistance, which through neglect, or in adult persons by too early return to work, place such persons in excellent receptive condition for infection.

Vicious habits, particularly over-indulgence in alcoholic drinks, to the neglect of good food, often results in lowered health and predisposition to tuberculosis.

Over-crowding is a far too frequent cause in the production of weakened bodies. Workshops, school-rooms, and homes seem often to be constructed to keep air out rather than to let it in. In

many rooms, persons are crowded into a limited air-space with almost utter disregard to ventilation. To breathe vitiated air is at all times harmful. An impression prevails also that night air is harmful and that open windows at night are dangerous. This is the contrary of the actual facts. Outside night air is almost invariably more pure than that of a closed room in which the oxygen is being consumed by human beings, lamps or gas.

The Changes Produced in the Lungs by the Germ.

The bacillus tuberculosis is a parasitic plant which in pulmonary tuberculosis feeds on the lung tissues. At the same time it casts off substances which not only lessen resistance locally, but which, when they get into the blood and circulation, are largely responsible for the symptoms of the disease.

When the germs get into healthy lungs, even though they gain a foothold, they are usually overcome by the tissue cells and fluids.

But when the germs get into the lungs of persons whose health or resistance is below normal, the germs often gain the victory. The elementary change produced in the lung tissue is a little nodule about the size of a pin's head called a tubercle. This tubercle can break down into an ulcer or small abscess. If many such be near together, a cavity may be formed.

In healing, or "cure," the tubercles, ulcers and abscesses are replaced in whole or in part by ordinary scar tissue, such as that by which wounds on the surface of the body are repaired.

The Symptoms of Tuberculosis.

The difficulty of early recognition, combined with the mildness of the discomfort in the early stages, are the factors largely responsible for neglect of this disease by its victims, until a time often so late as to not give much real chance for recovery.

In the beginning all that may be evident is a tired feeling or a tendency to fatigue after work, some variation in appetite, some slight loss of weight and an irregular cough of somewhat obstinate character.

Later on, the loss of weight and cough may be increased, much sputum may be expectorated, fever may be noted, night sweats may occur, and there is increasing weakness.

Still later may be shortness of breath, with accentuation of the above symptoms and with or without hemorrhage or other complications. In this third stage is met the typical emaciated, weakened, coughing consumptive.

The Two Fundamental Facts in the Prevention of Tuberculosis.

These are two, being dependent upon the two causative factors.

The first implies the destruction of the germ.

The second implies the strengthening of the weakened body.

The Destruction of the Bacillus of Tuberculosis.

Most consumptives acquired the disease from other consumptives and this because the latter failed to destroy their sputum, for it is through the sputum of consumptives that tuberculosis is almost exclusively spread.

The problem of destroying the germ almost narrows itself down, therefore, into destroying all sputum.

This is accomplished by having the patients expectorate into paper spit-cups or napkins that can be burned, or into pocket spit-cups that can be easily disinfected, or into spittoons containing solutions like lye or carbolic acid (five per cent.), which kill the germ.

Consumptives should avoid coughing or speaking into other people's faces; should have separate eating utensils which are boiled after use; should wear no beards; should bathe hands frequently, especially before eating; and should sleep in separate beds and rooms.

The bed and personal clothing and the rooms occupied by such persons should be sunned and aired as much as possible, for fresh air and sunlight will kill in a few hours the germs that live for months in damp, dark places. Because the germs live longest under such conditions, tuberculosis has also been called a house and a filth disease. Rooms of consumptives should also, when convenient, be fumigated from time to time by formaldehyde or other method.

Regarding infection through milk, it is hoped the time will soon come when all dairy herds will be free from tuberculous cattle. All dairy cattle should be tuberculin tested.

The Development of the Resistance of the Body.

The elimination of the accessory or predisposing cause is accomplished by building up the bodily health.

The causes of physical weakness or retrogression were discussed in a pre-

vious paragraph and their eradication at the same time indicated.

In a few words, the proposition is to have all such persons breathe pure air only and constantly, every hour in the twenty-four; to eat slowly nutritious food-stuffs; and to obtain all the rest and sleep needed, with just enough bodily exercise to keep the body in good tone.

These are simple rules, but because they are in opposition to the present mode of living of many people, are extremely difficult of adoption. Teachers by word and practice in school-room can inculcate these truths with lasting effect on their pupils.

The Cure of Tuberculosis.

There is no medicinal or climatic specific or cure for tuberculosis. The basis of modern treatment, and that which is responsible for most of the healing and cures, is what is known as the hygienic-dietetic treatment. This is nothing more than the mode of life just mentioned. It can be carried out anywhere. Home climate with comforts and contentment is always superior to faraway climates with straitened circumstances and home-sickness.

Tuberculosis is healed or cured by making the blood and tissue richer and stronger. This enables them to resist and often overcome the germs and to repair the damage which has been done.

The tuberculous patient, however, needs supervision by a physician who has made a study of the disease. Complications are constantly arising and the hygienic treatment is not as simply carried out in practice as it is expressed in words. Every consumptive, therefore, should be under the care of a private or dispensary or hospital physician. If he can enter a sanatorium (place of healing) his chances of cure will be increased.

Sure cures in the way of patent medicines, and especially cough medicines containing alcohol or opiates, are dangerous. Valuable time is lost by such temporizing.

Pure air, good food, sufficient rest, a hopeful temperament and supervision by a competent physician—these are the elements that make for cure, just as they are also potent forces for prevention.

In spreading the knowledge of these truths teachers can be of inestimable service in this great struggle.

Written by GEORGE H. KRESS.

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The Tuberculosis [Consumption] Problem

WHAT DAIRY FARMERS SHOULD KNOW ABOUT IT.

Tuberculosis a Disease of Both Man and the Lower Animals

Pulmonary tuberculosis or "consumption" causes more unnecessary deaths among adult persons than any other disease of the human race.

Among certain of the lower animals, especially among cattle and swine, it is also widespread.

The financial loss from this unnecessary loss of human life runs into several hundred million dollars yearly.

The annual money loss from the cattle and swine which die of tuberculosis has not been estimated, but it is far greater than most dairy farmers imagine.

The Causes of Tuberculosis are Known

The causes of this disease have been studied and it is now known that all tuberculosis results from the changes brought about by a little plant or germ.

This germ thrives best in those animal bodies that are not in good health. All conditions which are opposed to good health are, on that account, favorable to the spread of tuberculosis.

Two Good Reasons Why Dairy Farmers Should be Much Interested in Tuberculosis

The first is a public health reason, namely, that the milk of cattle having tuberculosis is a dangerous food for human beings.

The second is an economic or dollars-and-cents reason, namely, that the dairy farmer whose cattle have tuberculosis is receiving less milk, his cattle will bring less money as beef, and the disease, being often fatal, when once started in a herd will lead to much money loss.

Why Human and Bovine Tuberculosis Should be Prevented

The reasons for the prevention of tuberculosis are those just given.

No conscientious man wishes to cause some other person to take a frequently fatal disease.

No sensible man wishes to spend his energy and money on a herd of cattle which a disease is tearing down faster than he can build up. If dairy farmers fully realized that tuberculosis cattle bring in little or no money profit, they would be only too glad to have their herds tested by tuberculin and would sell such cattle as beef.

The Frequency of Tuberculosis Among Cattle

In Denmark, Professor Bang found that almost 40 per cent of all cows had tuberculosis; in England McFadyean estimated the percentage at thirty; and in the United States it is also high.

When a tuberculous cow is admitted to a herd, it becomes simply a matter of time, depending upon the kind of stables and general sanitary arrangements, before other cows become infected.

How the Disease is Spread

A consumptive person can cough up millions of these germs in a single day.

In tuberculous cattle the germs are also brought up from the lungs and through the saliva and drippings from the mouths of the cows contaminate the barns and other cattle.

The Symptoms of Tuberculosis

A person with tuberculosis usually does not know he has the disease until it is far advanced. This is due to the slow onset and mild symptoms in the early stages.

The same slow course holds good for cattle. Cows may have tuberculosis and give virtually no external signs of the disease. Yet at the same time they may be far enough advanced to be infecting other animals in the herd.

The Detection of Tuberculosis

Tuberculosis is much more readily detected in cows than in man, because in cattle the "tuberculin test" can be used. This "tuberculin" is a substance or extract made from the germs. When it is properly injected beneath the skin, the tuberculous cattle will have fever.

All Dairy Herds Should be Tuberculin

Tested

A herd having tuberculous cows is on the way to sickness and death. The wise owner will save money by having his herd tested. Cows which react, that is, which show fever, should be separated and not be allowed to be near the healthy cattle.

Only tuberculin tested cattle should thereafter be added to the healthy portion of the herd.

What is to be Done with the Tuberculous Cattle?

If the infected cattle are of a fine strain or otherwise desirable, and if they are outwardly in a fair state of health, they may be kept for breeding purposes and their good qualities so perpetuated, for tuberculosis is not hereditary.

The calves of such cattle, however, must be taken away a day or two after birth and thereafter fed on the milk of tuberculin tested cattle or on pasteurized milk (milk heated to 155 degrees Fahrenheit for 15 minutes).

If such infected cattle be kept in well lighted and ventilated barns, the disease may become less active. It may be possible then to sell such cattle later on for beef.

When the disease is far advanced, however, the government refuses to allow its inspectors to pass such animals for food purposes.

What Other Safeguards Should be Observed?

After a herd has been tuberculin tested and the diseased cattle separated, it is necessary to disinfect the stables. This is most easily done by scrubbing the woodwork with a hot solution of lye and then applying a coat of whitewash made from freshly slacked lime.

The germs of tuberculosis live for months in damp, dark places, but sunlight and fresh air kill them in a few hours. Pure air furthermore always works for good health. There is thus a double reason for well lighted and ventilated barns.

Other Details Worthy of Observation

by Dairy Farmers

The dairy farmer who wishes to sell only a pure and safe milk must pay attention to the following items:

Employees must all be healthy.

Cattle must all be healthy and tuberculin tested.

Food and water supplies must be good.

Cows must be clean, particularly the udders.

Milker's hands must be clean.

Barns must be clean and sanitary, and free from dust during milking.

Milk must be received into sterilized pails having small openings and must be taken as rapidly as possible to a clean milk room and cooled, the milk room being free from flies or dirt.

Delivery should be in sterilized bottles and the milk should be kept cool until delivered, if possible.

These precautions are necessary because milk is one of the best mediums known in which germs can grow.

The milk in a healthy cow's udder is pure and safe; it is made impure and unsafe by bad methods in handling.

Attention to the facts just given would mean the prevention of much unnecessary sacrifice of human life and at the same time would allow more valuable herds of cattle to be developed and greater money profit to accrue to dairy farmers.

Written by George H. Kress, M.D.,
Los Angeles, Cal.

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A Few Facts About Tuberculosis (Consumption)

The Nature of the Disease.

1. Tuberculosis is a Communicable Disease.
2. Tuberculosis is a Preventable Disease.
3. Tuberculosis is a Curable Disease.

What Do the Above Three Statements Mean?

They mean: 1. That when persons who have the disease are careless, they may infect other persons.
2. That when people take proper precautions, the disease can be prevented.
3. That when persons who have the disease live the right kind of lives, they may be cured.

What Are the Causes of Tuberculosis?

First, a predisposing cause, that is, any mode of living which weakens the human body.

Second, an exciting cause, that is, a germ which gets into the human body, and which, in run-down persons, finds it an easy task to get a foothold and start the disease.

What is the Nature of the Germ or Exciting Cause of Tuberculosis?

The germ is a vegetable parasite, less than one five-thousandth of an inch in length. Its favorite place of growth is in the lung tissue of a person who is not in good health.

How May the Germ Be Prevented from Acting?

Simply by destroying the sputum. The spit of a consumptive in 24 hours may contain millions of these germs. Therefore, every consumptive should spit into cuspidors containing anti-septic solutions like lye or carbolic acid (1 to 20) or into cloths, or papers or spit cups that can be burned. Never, never, never, should a consumptive talk or cough into other people's faces, nor swallow the sputum, nor spit on the floor.

What is the Nature of the Accessory or Predisposing Causes of Tuberculosis?

Anything that lessens the strength or resistance of the body, predisposes to tuberculosis. These causes, roughly grouped, are weakness that comes either from overwork, overcrowding, underfeeding, vicious habits or previous diseases, like grippe and typhoid.

How May the Predisposing Causes be Prevented from Acting?

By living simple lives, that is, by working and sleeping in pure air (which means well ventilated workshops and rooms), by eating nutritious foods slowly, by getting sufficient rest and sufficient exercise, by avoiding fatigue whether from unnecessary or necessary work or tasks, by refraining from vicious habits, and by getting strong before going to work after an attack of some other disease like grippe.

What Are Some of the Symptoms of Tuberculosis?

The symptoms vary. At first there may be a cough that hangs on, with irregular appetite, tendency to tire easily, a slight afternoon fever, and perhaps some loss of weight. Later the above, with night sweats, pleurisy, blood-spitting, cough with expectoration, much weakness, loss of weight and other symptoms.

How May Tuberculosis Be Cured?

By doing the same things urged in the above paragraph, namely, by following the simple life in both body and mind. If you are in poor health, tire easily, have a cough that hangs on, go to see a physician and ask his advice. In the late stages the disease is most difficult to cure, but in the early stages the task is much easier and far less expensive.

Written by Dr. George H. Kress,
Los Angeles.

*This is Educational Leaflet number 7 (Illustrated Facts), issued by the California Association for the Study and Prevention of Tuberculosis. Single copies, one cent each. Larger lots, prices on application. Office of the Association, 240 Bradbury Bldg., Los Angeles, Cal.

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The Prevention and Cure of Tuberculosis*

NOTE.—This leaflet is largely a discussion of the hygienic-dietetic or simple, open-air life, which all persons, whether sick or in health, would do well to follow.

One of the first thoughts which a person who has pulmonary tuberculosis (consumption of the lungs—the great white plague) should get firmly planted in his or her mind, is that tuberculosis is a very serious disease; a disease so serious, in fact, that one out of every ten persons dies therefrom. If the serious nature of this scourge can be impressed on such a person, then he or she is usually quite willing to do the things necessary to get well and be cured.

A second thought for the patient to fully appreciate is that this disease is also one of the most curable of all diseases, that is, if the right efforts are made to overcome it in its

early stages; and that even in its advanced stages, under most discouraging surroundings, it has been possible to restore to careers of usefulness many lives. It has been estimated that as high as ninety-seven per cent of all persons are infected with tuberculosis some time during life, but that about ninety per cent of this number recover spontaneously, showing how very curable this disease is, in spite of its contrary reputation.

This pamphlet on some maxims for persons sick with tuberculosis will only briefly discuss medicinal measures; consider more at length, the hygienic-dietetic treatment; and outline also, some of the means of prevention.

SUMMARY OF MEASURES USED IN TREATMENT OF TUBERCULOSIS

For the purpose of this paper (which aims only to present a brief insight into the mode of life which the tuberculous, and we might add, the non-tuberculous also, should follow), a summary of the measures used in the prevention and treatment of pulmonary tuberculosis and which in this paper will be considered in turn, might be arranged as follows:

I. HYGIENIC DIETETIC TREATMENT	A. Surroundings.....	a. Physical.....	1. Climate 2. Locality 3. House
		b. Mental.....	1. Social 2. Temperament
	B. Diet.....	a. Habits of eating b. Foodstuffs c. Clothing	
II. MEDICINAL TREATMENT	C. Mode of Life.....	b. Baths.....	1. Air 2. Sun 3. Water
		e. Rest.....	1. Mental 2. Bodily
		d. Exercise..... e. Sleep f. Amusements	1. Lung 2. Bodily
III. PREVENT- IVE	A. Symptomatic B. Eliminate C. Tonic D. Immunizing E. The Physician	Tubercuins	
		a. Sputum.....	1. Napkins 2. Spit Cups 3. Cuspidors
	A. Against Exciting Cause or Germ...	b. Habits.....	1. Speaking 2. Coughing 3. Kissing 4. Eating 5. Batting 6. Sleeping
		B. Against Predis- posing Causes or Bodily Weakness.	a. Hereditary Weakness b. Previous Diseases c. Overwork d. Overcrowding e. Underfeeding f. Vicious Habits

*This is Educational Leaflet number 8 (Prevention and Cure) issued by the California Association for the Study and Prevention of Tuberculosis. Single copies, one cent each. Larger lots, prices on application. Office of the Association, 240 Bradbury Bldg., Los Angeles, Cal.

I. HYGIENIC-DIETETIC TREATMENT (OPEN-AIR LIFE)

As regards the hygienic-dietetic measures, this portion of treatment is of the very first importance. No matter what medicinal measures are used, the attention to surroundings, diet and mode of life must form the basis of all successful efforts to overcome tuberculosis. Without attention to these factors, the fight is apt to be in vain.

It has been the demonstration of this fact that has been responsible for the more modern opinion that tuberculosis is curable in any climate. Also that the patient living in an undesirable climate, who will make an honest effort to avail himself of the curative elements of such a climate, has a better chance for recovery than the patient who goes to a more distant clime, but who, through lack of means, knowledge or willingness, fails to live up to that mode of life which has proven to be so necessary, if the body is to conquer the tuberculosis germ and the disease it produces.

A.—SURROUNDINGS

Climate in General as a Curative Factor

Tuberculosis of the lungs can be and is cured in all kinds of climates.

That climate is the best for any particular patient, where that patient can live the hygienic-dietetic life most comfortably and contentedly.

The best climate in the world, if associated with poor food, uncomfortable surroundings and homesickness, is worse by far than a poor climate, with good food, comforts, contentment, desire to get well, and willingness to live the proper life under the guidance of a competent physician.

Climates are good for tuberculosis in so far as they contain uncontaminated oxygen, much sunshine, comparative dryness, daily temperature variations that are not too extreme and surroundings that make for nutritious living and contentment.

To leave an Eastern State for Arizona or California and upon arrival there to live in a poorly ventilated room and on insufficient food and rest, is worse than staying at home with comforts, nutritious food and good nursing.

Locality as a Curative Factor

Other things being equal, the country is better than the city, and a moderate elevation better than the low lands.

When one can choose, a beautiful scenic outlook is to be preferred.

The soil should be dry and of a nature to drain rapidly after rains.

Freedom from excessive dust and wind storms is desirable.

The foothills are better than the beaches.

A region is desirable when it has pure air, lots of sunshine, not too much moisture, and temperature variations not so extreme as to prevent the out-of-door life to the fullest possible extent.

Other things being equal, that locality is to be preferred, which in addition to the atmospheric factors just given, also has facilities for good food and pleasant houses and surroundings.

The House as a Curative Factor

The ground on which the house stands should be dry and well drained.

That house is to be preferred which contains rooms that can be easily ventilated, and which during the day can be flooded with outside air and sunlight.

A room with a southern exposure is usually desirable.

The room with good exposure and having two or more windows for ventilation, is to be preferred.

The tuberculosis patient should have a separate room, if possible, and always a separate bed.

Flood the rooms of the house in which the patient lives with sunlight and fresh free air from the outside and avoid dry dusting methods in cleaning.

Social Surroundings as a Curative Factor

The persons with whom the patient lives and associates, should be willing to co-operate with him in living the life laid down by the physician.

The patient's friends cease to be friends when they give advice on treatment and other things concerning which they know little or nothing.

The advice of well-meaning but foolish and ignorant friends has been responsible for the death of many patients who were on the road to recovery.

The patient's family are to be preferred as associates, to strangers, provided that neither the family nor the patient plays the roll of tyrant.

The Patient's Temperament as a Curative Factor

The patient's condition of mind is of the very highest importance.

It is never too late for the hopeful patient to begin the fight against the disease.

A contented, happy courageous mind is worth a host of ordinary tonics. Many persons who were given up entirely by family, friends and physicians have recovered from tuberculosis.

Willingness on the part of the patient to follow the advice and do the things laid down by his physician is most important.

And equally important must be the unwillingness by the patient to accept the advice of others than the physician.

Talkativeness, particularly in discussing one's own condition to friends, is to be deprecated, because of its bad effects on both the mind and the body. To save the voice aids recovery. Letter writing is also easily overdone.

Tuberculosis follows a path of many windings and obstacles. One guide who knows the road and way out, is worth a host of chance and guess pilots. Hold fast, therefore, to the tried physician, in whose care you have given yourself.

B.—DIET

Habits of Eating as Curative Factors

Three meals a day, with single in-between lunches for patients who are up and about, are an ample sufficiency.

Food should be eaten slowly.

The condition of the teeth and mouth should be looked after. Particularly after milk should the mouth be rinsed.

A dainty table service acts as an appetizer. Do not let the remains of previous meals remain on the table, to take away the appetite. Rest in the recumbent position, both before and after meals, often aids digestion.

Foodstuffs as Curative Factors

To get a maximum amount of energy and nutrition from the foodstuffs eaten, with the least possible work on the part of the stomach is the purpose of a dietary in tuberculosis.

Milk, eggs, rare meats and the more digestible vegetables form the basis of many diet lists.

Fruits and laxative foodstuffs are desirable. Avoid fried foodstuffs, pastries and rich sweets.

Avoid ice water, and drink water between rather than at meals.

Alcohol is not a food. Do not use wines unless ordered by your physician.

Three ordinary meals a day on which the body is to hold its own, and enough milk and eggs in the ten and three o'clock lunches to build up a nutritional reserve, is not a bad plan to follow.

Food at night in shape of a glass of milk or an egg often helps overcome sleeplessness or cough.

Disorders of digestion should not be neglected, for the stomach is the fuel box from which the energy necessary for healing is generated.

C.—MODE OF LIFE

Clothing as a Curative Factor

Just enough clothing to keep the body warm, light woollens or the linen meshes preferred.

Do not wear so much underclothing as to bring on perspiration. If such perspiration evaporates too rapidly, the skin is chilled and the lungs are liable to increased congestion and inflammation.

At night keep the feet and body comfortably warm with sufficient bed clothing. The same holds true during rest out of doors during the day.

Do not wear chest protectors. They weaken instead of strengthen the chest and predispose to colds.

To keep warm in cold weather, or in the shade or wind use overcoats and top clothing, rather than an excess in amount of underclothing that will bring on a perspiration and under proper conditions be responsible for colds and inflammations.

In rainy weather, keep the feet and shoes dry, by wearing rubbers. If the body and feet do become wet, take an alcohol rub and put on dry clothing.

The clothing should be loose; and clothing which hinders free breathing and movement of the body is detrimental. This applies especially to the clothing of women.

When the patient sleeps out of doors, it is often wise, in cold weather, to wear an extra or night undershirt, and perhaps a cap or other head covering.

Baths as Curative Factors

The baths to be considered are of three kinds, air, sun and water.

Of these, the air bath is the most important. The tuberculous lung should be constantly bathed in pure air. This is accomplished by being out in the open as much as possible during the day, and by sleeping on a porch or in a well ventilated room at night.

The outside night air is nearly always more pure and more beneficial to healing than any inside-room air; certainly always better than that of a poorly ventilated room.

Fever is no excuse for living in a poorly ventilated room. Place the couch or bed in a well ventilated room or porch.

Sun baths are to be used with discretion. The head should be protected and the skin should not be exposed sufficiently to inflame or burn. The time of exposure and frequency depends upon the intensity of the sunlight. In the beginning an exposure of about ten minutes may suffice.

Cleansing water baths should be taken once or twice a week, at a comfortably warm temperature, and usually before going to bed.

Tonic water baths are most easily given by means of the sponge. A quick sponging of the chest and trunk by means of a sponge or wash cloth, with water at ordinary hydrant temperature, followed by drying with a soft towel and a rub with a rough towel, sufficient to bring a glow to the skin. These are best given on rising in the morning.

Rest as a Curative Factor

Rest of mind and body are nearly always needed by the tuberculous patient.

An active or worrying mind will use up energy that should go to the repair of the diseased lung tissue.

The patient with tuberculosis should never hesitate to rest, when so disposed. Rest in the pure air, to the body that needs it, and the body of the tuberculous patient nearly always does, is almost always beneficial.

A brief rest, lying down, before meals, acts often as an appetizer, and a rest for a half hour or so afterwards helps digestion.

Rest should always be taken in the pure air. If in the room, the windows should be open and if the temperature is cold, the body should be kept warm with sufficient clothing and coverings. A hot-water bottle near the feet is often grateful.

Night rest should not be neglected and eight to ten hours of such sleep, in a well ventilated room or on a screened porch, should be striven for.

Exercise as a Curative Factor

When a tissue is diseased, nature always seeks to aid its repair, by giving it rest. This rule holds good with the diseased portion of the lungs, and such portions lag more than the healthy tissue.

No lung or breathing exercise should be taken except on the advice of a physician.

Instead of breathing exercises in which an attempt is made to get too much air in the lungs in a few minutes, aim to get sufficient pure air in the lungs every minute of every hour of every day.

An easy rule for a proper position of the chest is to hold the head up, with the back of the neck in contact with the collar.

Bodily exercise, if not used with discretion, may be dangerous. More than one patient has walked or exercised himself to death.

Do not exercise if the sputum is tinged with blood, nor when there is much shortness of breath or palpitation of the heart, except as ordered by your physician.

The rule for exercise is for the patient to always stop before he feels fatigued. No matter what the exercise, whether it be great or small, if the body be fatigued therefrom, it is probably harmful.

Patients with fever had better take their walks in the morning, when the fever is not present. Patients with fever should always consult their physician about exercise. With such patients exercise requires the same discrimination as powerful medicines.

Amusements as a Curative Factor

Amusements are like exercise. If in just sufficient amount to relax the mind and body, without strain or effort, they act as a tonic and are beneficial.

Cards and other games are harmful when they are sufficiently exciting to cause an increase in the fever.

Theatres are harmful, not only because of the exciting character of many plays, but also because of the crowd and impure air.

Outdoor amusements are nearly always to be preferred to indoor recreation, because the outside air is nearly always more pure.

Sleep as a Curative Factor.

Do not stint in giving yourself all the sleep your body craves, but see to it always that you sleep in pure air.

Sleeping in a screened room or porch is always to be preferred, but if the weather be raw, a suit of underclothing in addition to regular night dress, and perhaps a head covering of some sort, may be advisable.

When a room is used for sleeping purposes, choose one with more than one window. A single window room, unless there be a fireplace in it, is most difficult to ventilate.

If the air be cold and raw, and there is no adjacent dressing room, the windows may be almost closed, one-half hour or so before rising, to take the chill off the air while dressing.

Have sufficient bed coverings to keep the body warm, but choose the light rather than the heavy kinds.

II. MEDICINAL TREATMENT

Symptomatic Measures as Curative Factors.

Cough is often a distressing symptom. The patient should teach himself to keep down the cough, except when secretion has accumulated that must be coughed up and expectorated.

A very large proportion of coughing among tuberculosis patients is a habit cough. Avoid and strive to overcome such a habit. Unnecessary coughing pulls and tears at the lungs and helps spread the germs from the diseased to the healthy portions of the lungs.

A glass of milk, preferably warm, will often lighten the morning cough.

Avoid patent cough medicines. They nearly always contain opium and alcohol. They suppress the cough, but they do not do away with the things that cause the cough. Even though the cough is less, the disease is probably growing worse. These medicines also interfere with digestion and fasten dangerous habits upon the system.

For the pain in the chest, local remedies like painting with tincture of iodine should be tried before opiates.

In case of unexpected hemorrhage, try to avoid being excited. Few people die of hemorrhage. Get into a comfortable position, avoid talking, have the clothing loosened, the room cool and quiet, and then let your physician be your guide.

If medicines disagree with you, discontinue them and consult your physician in regard thereto.

For other symptoms, let your physician advise what treatment may be necessary.

Eliminative Measures as Curative Factors.

Elimination is through the bowels, the kidneys, the skin and the lungs. Here we need concern ourselves only with the bowels.

The patient should have a bowel movement daily. If a regular time and habit and proper diet be insufficient to induce such a movement, then recourse must be had to mild laxatives like the fluid extract of cascara, or to salines like salts or seidlitz powders.

Tonics as Curative Factors.

Remember that pure air is one of our most powerful tonics. Herein lies much of the value of the hygienic-dietetic life.

Avoid cod liver oils and such like preparations unless prescribed by your physician as being good for your particular case.

Avoid wine, whisky and other liquors unless prescribed in definite amount by your physician.

Tonics are often valuable aids, but discrimination is needed in their use. Here, as in foods, what is good for one, is poison for others.

Immunizing Measures as Curative Factors.

In all infectious diseases (diseases caused by

living organisms or germs), Nature seeks to overcome these invaders by having the blood and tissues of the body manufacture substances that will not only neutralize the poisons thrown into the tissues and circulation by the germs, but which will make the body tissues and fluids an undesirable home for the germs.

In some infectious diseases, Nature is able to accomplish this result with considerable success. Not so, however, in many cases, as regards tuberculosis.

To help stimulate the body to produce these substances which are antagonistic to the germs and the poisons which the germs produce—in other words, to stimulate the body to build up an artificial immunity, if possible, a line of remedies known under the general name of tuberculins have been brought out. These, however, cannot be discussed here. The tuberculins, more than any other remedies used in tuberculosis, require skill in their application. They must never be given except by a physician, but statistics show that their proper use increases the percentage of recoveries by twenty-five to fifty per cent.

The Physician as a Curative Factor.

A word about the physician. The patient with tuberculosis who wishes to get well will content himself with only one physician at a time. Such a patient will carefully obey the instructions of the physician, will not talk about his condition to other persons and will not let other persons give him advice. Time and again, the great harm of such advice has been shown.

The disease is treacherous and hard enough to overcome at best, without having the patient in a constant whirlpool of doubt, wondering whether to do or to experiment with this, that or the other remedy, advised by this, that or the other person who, without intelligent knowledge or learning, is sure that his particular remedy or advice will lead to prompt and decisive cure. Where trained and experienced physicians fail, the chances of failure is far greater by those who have no such professional learning or experience.

Let your physician be your guide. He will map out your mode of life, will try to keep you from falling into pitfalls of the hygienic-dietetic life and will advise those lines of medication which, in his judgment, seem best for your particular case. He will individualize his treatment to make it fit your particular case. Individualization in treatment is of the highest importance in tuberculosis and this makes necessary skilled medical supervision.

III. PREVENTIVE MEASURES

The Prevention of the Exciting Cause.

A person with tuberculosis usually acquires the disease, directly or indirectly, from some other person who has tuberculosis.

The disease is usually transferred from the sick person through the sputum which is coughed up by the sick person.

This sputum contains the little plant or germ which is the direct cause of the disease. This parasitic germ is and must be present always in the tissues where there is tuberculosis.

This germ or bacillus of tuberculosis lives for months in dark places, but the sunlight and free air kill it in a few hours. Herein lies the great importance of flooding all rooms of the house with air and sunlight, these being far better disinfectants than those purchased in the drug shops.

The best way to prevent the action of this tuberculosis germ is to keep it from getting into the bodies of healthy persons, and the easiest way of doing this is to destroy all sputum that is coughed up.

This is accomplished by expectorating the sputum into cloths or papers or paper spit cups that can be burned, or into spit cups or cuspidors that either contain a disinfectant solution like five per cent. carbolic acid or ordinary lye, or that may be steamed or boiled or otherwise disinfected.

Don't let the sputum dry anywhere, and so prevent it from being blown about, to get into the air we breathe, the food we eat, or the things we handle.

For the same reason dry dusting should be avoided, damp cloths and brooms being better always.

Persons sick with tuberculosis:

Should not speak or cough into other people's faces.

Should not kiss people or children.

Should wash their hands before meals and whenever sputum gets on them.

Should have separate eating utensils, which should be separately boiled.

Should have a separate bed, and, if possible, a separate well lighted and ventilated room in which to live.

In short, to prevent tuberculosis, the person who has the disease and who is coughing up the germ-laden sputum, must allow no lapse in his habits or in his vigilance of trying to keep this germ-laden sputum from directly or indirectly reaching other human beings.

As a possible source of infection, tuberculous dairy cattle must not be forgotten. The milk of a herd that has been tested and found free from tuberculosis is always to be preferred.

The Prevention of the Predisposing Causes.

Through the discovery of the germ or bacillus of tuberculosis and the elimination of the theory of hereditary transmission must disappear also much of the fatalism with which tuberculosis has been accepted by many persons.

The general groups into which the predisposing causes fall may be said to be bodily weakness or lack of resistance resulting either from hereditary enfeeblement, overwork, underfeeding, previous diseases, vicious habits, overcrowding or general unhygienic mode of living.

Hereditary enfeeblement.—Many infants are born weak. Unless such children can be developed physically, they are apt to give but feeble resistance to disease. Such children should be guarded from overstudy and should be made to spend much time out of doors.

Overwork, mental or physical, whether from necessity or from choice, through the bodily fatigue and weakness induced, is responsible for many infections from tuberculosis.

Certain occupations also, like those with irritating dusts, frequent temperature variations, confined positions and so on, favor the production of bodily or pulmonary weakness.

Underfeeding, whether from insufficient or improper foods, is another factor responsible for much bodily weakness. The food should be eaten slowly, and should always be of a nutritious nature. If cow's milk is used, it should be obtained, if possible, from a dairy having no tuberculous cattle.

Previous diseases—and particularly in childhood, measles and whooping cough, and later in life, grippé, pneumonia and typhoid—often induce a lack of resistance, which, through neglect, or in adult persons by too early return to work, place such persons in excellent receptive condition for infection.

A cough that continues more than several weeks, especially if associated with a tired feeling, loss of appetite or weight, should be taken as a very sufficient reason for having a physician investigate the cause and nature of the cough.

Vicious habits, particularly over-indulgence in alcoholic drinks, to the neglect of good food, often results in lowered health and predisposition to tuberculosis.

Overcrowding is a far too frequent cause in the production of weakened bodies. Workshops, schoolrooms, and homes seem often to be constructed to keep air out rather than to let it in.

In many rooms, persons are crowded into a limited air space with almost utter disregard to ventilation.

To breathe vitiated air is at all times harmful.

An impression prevails also that night air is harmful and that open windows at night are dangerous. This is the contrary of the actual facts. Outside night air is almost in-

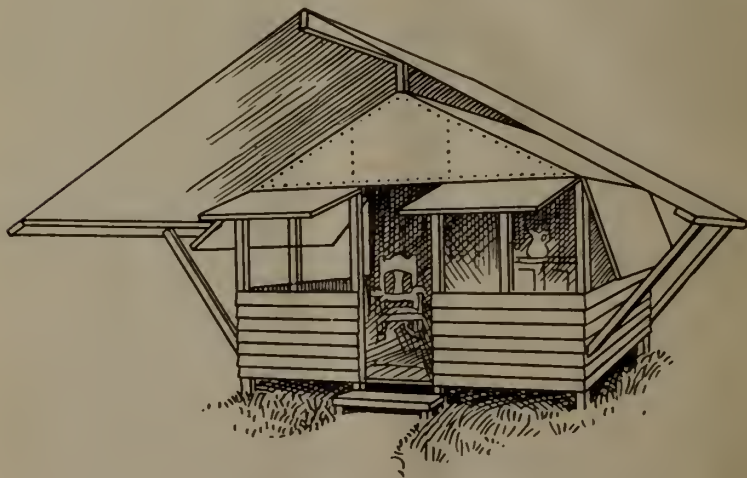
variably more pure than that of a closed room in which the oxygen is being consumed by human beings, lamps or gas.

Written by George H. Kress, M.D.,

Los Angeles, Cal.

"The Modern Crusade against tuberculosis brings hope and bright prospects of recovery to hundreds and thousands of victims of the disease who under old teachings were abandoned to despair."

THEODORE ROOSEVELT



DESIGN OF CHEAP TENT HOUSE

The above drawing shows how a tent house may be cheaply constructed. Buy first an ordinary tent of size desired. Then make a floor of same size, free from ground, which is well drained. Erect vertical posts and roof, and slip the tent over this frame. This will leave about three feet of side space to be covered by wood (as in diagram) or by ordinary canvas. The side flaps of tent can be stretched on hinged frames (as in diagram) or attached to rollers and pulleys. Screening is placed as indicated. A hole, covered with wire screen, may be cut in roof, for better ventilation. For protection from rain and sun, a "fly" of canvas may be stretched over the roof and sides as indicated. By having it project somewhat in front (as in diagram), protection is also given from the sun when sitting out of doors. G.H.K.

Copies of this and other literature on prevention and cure sent gratis on application.

Other Anti-Tuberculosis Societies are given permission to republish these leaflets, on condition that credit is given to the California Association for the Study and Prevention of Tuberculosis.

HOW THE GERMS OF CONSUMPTION ARE CARRIED FROM THE SICK TO THE WELL



CONSUMPTIVE SPITTING ON FLOOR. GERMS FLYING ON IT, CARRY THE SEEDS OF THE DISEASE TO FOOD.

THE SPIT DRILLS AND CARELESS SWEEPING, DUSTING OR DRAUGHTS CAUSE THE GERMS TO FLOAT IN THE AIR.

THE GERMS MAY ENTER THE BODIES OF CHILDREN PLAYING ON THE FLOOR, THROUGH SORES OR WOUNDS.

OTHERS MAY GET THE DISEASE BY BREATHING OR SWALLOWING THE GERMS. SPRAY GIVEN OFF IN SNEEZING OR COUGHING, CONTAINS GERMS IN A NOISY AND ACTIVE STATE.

PUTTING FOOD, MONEY, PENCILS ETC. INTO THE MOUTH AFTER A CONSUMPTIVE HAS POISONED THEM WITH HIS SPIT.

NEW YORK STATE DEPARTMENT OF HEALTH.

CONSUMPTIONS ALLIES - AVOID THEM AND YOU ARE SAFEGUARDING AGAINST THE DISEASE



TEMPERANCE AND OTHER EXCESSES.

THE CLOSED WINDOW.

OVERWORK.

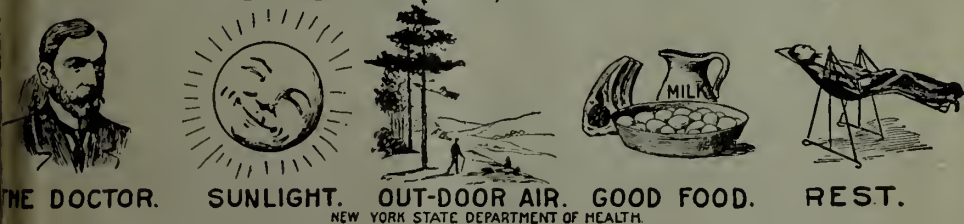
CROWDED SLEEPING LIVING AND WORKING ROOMS.

SMOKE AND DUST.

MOUTH BREATHING OFTEN DUE TO ADENOIDES.

NEW YORK STATE DEPARTMENT OF HEALTH.

IN CASE OF CONSUMPTION, LOOK TO THESE FOR CURE



THE DOCTOR.

SUNLIGHT.

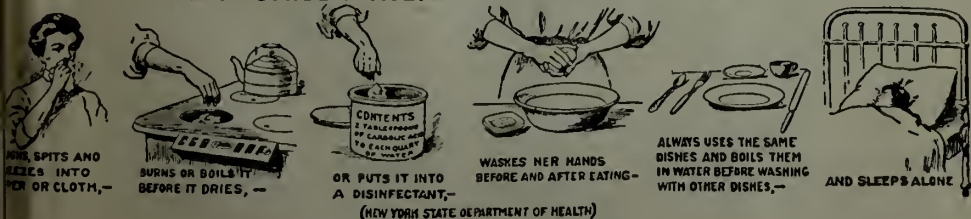
OUT-DOOR AIR.

GOOD FOOD.

REST.

NEW YORK STATE DEPARTMENT OF HEALTH.

A CAREFUL CONSUMPTIVE. - NOT DANGEROUS TO LIVE WITH.



HE COUGHS, SPITS AND SNEEZES INTO TISSUE OR CLOTH, -

BURNS OR BOILS IT BEFORE IT DRIES, -

OR PUTS IT INTO A DISINFECTANT, -

WASHES HER HANDS BEFORE AND AFTER EATING -

ALWAYS USES THE SAME DISHES AND BOILS THEM IN WATER BEFORE WASHING WITH OTHER DISHES, -

AND SLEEPS ALONE

(NEW YORK STATE DEPARTMENT OF HEALTH)





